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MISCELLANEOUS WORKS

OF THE LATE

ROBERT WILLAN, M.D. F.R.S. F.A.S.

COMPRISING

AN INQUIRY INTO THE ANTIQUITY OF

THE SMALL-POX, MEASLES, AND SCARLET FEVER,

NOW FIRST PUBLISHED:

REPORTS ON THE DISEASES IN LONDON,

A New Edition:

AND

DETACHED PAPERS ON MEDICAL SUBJECTS,

COLLECTED FROM VARIOUS

PERIODICAL PUBLICATIONS.

EDITED BY

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AND

JOHN PEARSON, Esq., F.R.S. F.L.S. M.R.I.

THE

Distinguished Friends of the late lamented Author,

THIS VOLUME

IS INSCRIBED,

WITH EVERY SENTIMENT OF RESPECT, ESTEEM, AND GRATITUDE,

BY THEIR OBLIGED AND FAITHFUL SERVANT,

THE EDITOR.

PREFACE.

THE following sheets consist of an Inquiry into the Antiquity of the Small-pox, Measles, and Scarlet Fever, by the late Dr. Willan: together with a re-publication of his Reports on the Diseases in London; and also of several Papers on medical subjects now first collected from various periodical works.

The two latter divisions of the volume having been long before the Public, require little prefatory notice; but something of that nature will probably be expected regarding the first part.

The interest we feel in tracing the origin and progress of diseases corresponds in some degree to the extensive range of their visitations, and to the devastation which has marked their course. Considered in this view, the contagious eruptive fevers are entitled to and have received a large portion of attention. Very few parts of medical science have been treated of in so ample a manner as the Small-pox, and it was asserted as far back as the

middle of the last century, that at least a thousand authors might be cited who had written on this complaint[a]. Many of those who wrote practically on the Small-pox were led to indulge in speculations relating to the origin of the disease, and, among the problems connected with the history of physic, this became not the least interesting, and often afforded scope for discussion and controversy.

In the early part of the last century the attention of physicians was drawn particularly to this question, by the dispute to which it gave rise between De Hahn[b] and Werlhoff[c]: others, however, as well subsequently as previously to their time, have concerned themselves in its decision. Of these, in addition to the late Dr. Woodville[d], Mr. Moore[e], and Professor Monro[f], of Edinburgh, who have

[a] Vide an Inquiry into the Origin, Nature, and Cure of Small-pox, (p. 12,) by T. Thompson, M.D. 1752.—See also Dr. Young's Introduction to Medical Literature, p. 236: and M. Ploucquet's Literatura Medica Digesta, Tom. iv. p. 251—279.

[b] Variol. Antiq. è Græcis erutæ.

[c] De Variolis et Anthracibus.

[d] History of the Inoculation of the Small-pox, Introd.

[e] History of the Small-pox, Chap. 1, 2, and 3.

[f] Observations on the different kinds of Small-pox, Chap. ii. Sect. i.

more recently appeared in this field of investigation, it may be sufficient to mention the names of R. à Fonseca[a], Hafenreffer[b], Sennertus[c], Chesneau[d], Martin Lister[e], Sidobre[f], Freind[g], Hillary[h], Reiske[i] and Mead[k].

It would be superfluous to notice the results of their labours to those who have interested themselves in such researches: but as Dr. Willan's Treatise may fall into the hands of more general readers, it may not be out of place to premise a very brief outline of the leading opinions which have been entertained respecting the antiquity of the Small-pox, as well as of the grounds on which those opinions have been severally supported.

By one class of writers it is maintained, that

[a] Consult. Med. c. 48. p. 322.

[b] De affectibus Cutis, Lib. ii. p. 214.

[c] De Febribus, Lib. iv. cap. xii. p. 465, &c.

[d] Med. Obs. Lib. iv. p. 475.

[e] Exerc. Med. de Morb. Chron. Ex. viii. p. 150-1.

[f] Tractat. de Variol. et Morbill. p. 3-11. 241-2.

[g] History of Physic, Vol. ii. p. 340.

[h] Practical Essay on Small-pox, Introd. p. 1-20.

[i] Miscellan. Med. ex Arabum monimentis, Obs. i. p. 8, 9, 10.

[k] De Variol. et Morbill. c. 1. p. 2-9.

the Small-pox and Measles (which, like the Measles and Scarlet Fever in more modern times, were for ages considered to be varieties of the same disease), were known to the practitioners of Greece and Rome. Another and more numerous party contend, that they cannot be traced to a period more remote than the commencement of the Mahometan æra, and assign the merit of first observing and describing these diseases to the Saracens.

The advocates of the first proposition deduce the conclusions at which they have arrived from their interpretation of the terms employed to denote eruptive complaints by the antients; asserting, that the descriptions extant in their writings which are supposed to refer to the Small-pox and Measles, resemble them respectively as nearly as might be expected, if we take into consideration the influence of different climates, customs, and modes of life; not to mention the changes which the lapse of time may have produced in the character of these as of many other diseases.

It has been also urged, that we have no reason for supposing that any causes which might be required for the production of new

forms of disease, should have remained dormant through a series of ages, and have been brought into action at a subsequent time.

Lastly, those who espouse this side of the question affirm, that a strong argument in their favour is furnished by the silence of the earliest oriental writers on this point; who, far from claiming for themselves the distinction contended for, neither speak of these complaints as indigenous to Arabia, nor of recent introduction there; whereas had such been the case, it is not to be believed that they would have failed to record with their ravages, the age and the birth-place of pestilences so destructive to the human race.

The more general opinion, that the contagious eruptive fevers did not prevail among the antients, is founded almost solely upon the want of direct and precise evidence of that nature in their works; it being considered incredible that such formidable maladies, if they had indeed existed, could have escaped the attention and accurate delineation of observers, the fidelity of whose descriptions in reference to affections of far less moment, is easily recognized at the present day.

To this it has been replied, that the paucity of information, and of positive testimony on

this subject afforded by their writings, may be adequately accounted for by the practice usual among the antient physicians, of referring to the same pestilential constitution, different malignant fevers; and regarding the eruptions attending them as the crises of disorders which varied less in their general nature, than in accidental combinations of the peccant humours of the body.

Another impediment, it has been said, to the progress of correct observation might have been derived from the feelings of apprehension and dread which contagious and fatal disorders are calculated to inspire in the minds of the attendants. To this might be added the influence of superstition, which probably on another account, deterred or prevented the antient physicians from giving that close attention to the sick which would have enabled them to note accurately the phenomena of pestilential diseases:—such maladies being generally considered as the infliction of divine vengeance on a guilty nation, medicine and all human aid were deemed unavailing.

In examining Dr. Willan's arguments in support of the affirmative of this question, it will be found that they are urged with greatest

force, and supported with more direct evidence, in the first and second chapters of his Inquiry. These were revised by him in his last illness: his farther progress in the task of correction having been terminated by death. It is due to his memory, and to the Public, to state this fact, which may at the same time furnish the editor with an apology for attempting a slight analytical sketch of the contents of this posthumous work.

It has been already observed that the commonly received opinion of the comparatively modern origin of the contagious eruptive fevers, rests on the absence or deficiency of distinct and express notice of these diseases in the writings of the antients. The treatise in question deprives this argument of much of its weight, by shewing that, according to a very high degree of probability, they were in existence during the periods in which those authors flourished, to whom they were by no means unknown; but that looking on these complaints merely as species of the common Pestilence, they treated of them conjointly with it, and considered it unnecessary to assign to them particular denominations, or to leave precise and accurate descriptions of them, as discriminated from the generic distemper, on record. (Vide "Inquiry," p. 18.)

Rhazes, the Arabian, the first writer extant who mentions the Small-pox under a specific name, was of opinion that it existed at least as early as the second century of the Christian æra, and was well known to Galen. (pp. 1 and 2.)

The Greek writer who translated Rhazes's treatise on Small-pox into that language, remarks on Galen's acquaintance with the disease as an undoubted fact, observing, however, that he only speaks of it "cursorily or in connection with analogous complaints." (p. 20.) The title of this translation (περὶ λοιμικῆς) and its preface prove that the Small-pox had been known to the *antient* Greeks under the name of Loimiké (the loimic or pestilential disease) and even divided into two distinct species. (pp. 20, 21.)

Haly f. Abbas states that the *antients* (Greeks) called the Variolæ, *Anthrakes:*—Constantinus Africanus, who used the Roman language, says, "Antiqui vocant has (variolas) *ignis carbones:*"—and the modern Greeks yet apply the terms Loimé and Loimic disease to the Small-pox and Measles. (pp. 18, 19.)

The identity, or near resemblance of these several denominations to those employed by the same people to describe the Plague itself,

and its more characteristic symptoms (Loimos and Anthrakes), evidently implies such an imagined close affinity between the things denoted by them, as is above asserted to have obtained in former ages;—strengthens the former reasoning with regard to the alleged confusion of all these diseases;—and goes far towards explaining the causes why the descriptions or allusions to the variolous eruptions, actually transmitted to us, should have been overlooked. For, since the Arabians themselves, long after the supposed origin of Small-pox, arranged it, the Measles, and the pestilential Bubo as the products of the same contagion, it was reasonable to expect that some traces of Variola might be found in the histories of Pestilences occurring in more antient times. (p. 2.)

Pursuing this idea, Dr. Willan institutes a strict analysis of the leading published statements on Pestilence; and the results of the investigation are such as had been anticipated; clearly evincing, that certain parts of them must, in almost every instance, refer to the Small-pox, and to the Small-pox only.

He sets out by laying down a comprehensive definition of Pestis (p. 2, note,) as a standard wherewith to compare the recorded

varieties of the general Pestilence to which his inquiry extends, with a view to distinguish and distribute them into their specific classes. The first chapter carries this investigation from the middle of the third century (p. 12) to the presumed period of the first appearance of the Small-pox, at Mecca, A.D. 569 or 70. (p. 17.)

An examination of the circumstances of the Epidemic which broke out at Alexandria, A.D. 252, and spread with great fury for twelve or fifteen years, ascertains this important point, that that Pestilence was not one uniform disorder, but comprised several of *different kinds* under it (pp. 12, 13,) distinguished by the narrators from the common Loimos.

The histories of the next considerable Plague in point of time (that which prevailed in Syria in the reign of Dioclesian) lead to the following deductions vitally material to the question at issue. 1. The mortality was not occasioned by one form of disease, but, *independently of the common Loimos*, there was, according to Eusebius, *another disorder* termed, from its fiery nature, Anthrax. 2. This Anthrax *spread over the whole bodies* of the sufferers. 3. The *eyes* were very frequently affected,

producing blindness in thousands of individuals. 4. Patients were not a *second time* attacked by the contagion. 5. It is by another author represented as an *ulceration attracting or draining out humours*, and attended with an offensive smell. (pp. 5, 6, 7.) Now it is very doubtful whether any of the several characteristics above specified will apply to the pestilential Bubo; certain that most of them will not; and equally certain that the aggregate will not correspond to the description of any other complaint except the Small-pox: but that it will, with great fidelity, coincide with the most accurate accounts of the Small-pox in its confluent form. Dr. Willan therefore concludes, and the conclusion seems to be irresistible, that the disease distinguished so frequently under the name of the *spreading* or *herpetic Anthrax* from the common Loimos, was the confluent Small-pox.

The destructive Loimos which began in the fifteenth year of the reign of Justinian (A.D. 540), and ravaged the greater part of Europe and Asia for more than half a century is next noticed. It was only observed at first as the Pestilence under its usual form, attended with tumors in the groin, or in the axillæ, or

behind the ears, and is therefore proved to have been essentially different from the Anthrakes diffused over the whole surface of the body. But, in its progress, this Pestilence also was found to consist of *various disorders*, corresponding in their leading features, according to the description of Evagrius, to "the true Pestilence, the pestilential or scarlet Sore-throat, and the Dysentery, with the Small-pox, and perhaps the Measles." (p. 16.)

This fatal epidemic is shewn to have continued in Asia till the year 590. The Abyssinian army engaged at the siege of Mecca was seized with the Small-pox, A. D. 569 or 70. The last occurrence, therefore, is accounted for by the supposition that the infection was imported thither in goods from Suez or other ports of the Red Sea. This easy and natural explanation of an event hitherto deemed so extraordinary, is very strongly corroborated by the particulars, and the interpretation of the Arabian Chronicle which records it. (p. 17.)

In the second chapter the inquiry is continued through the writers of the first and second centuries. It, in the first place, adduces a description by Philo Judæus, of a Loimic disease before the middle of the first century (pp. 24, 25,) which agrees very nearly

in its particular features, and in the terms employed, with Eusebius's account of the herpetic or spreading Anthrax, and very "appositely expresses the mode of diffusion, and the circumstances of the confluent Small-pox."

Herodotus, a physician of Asia Minor, who flourished at Rome in the time of Domitian or Nerva, is the next authority, in point of time, adverted to. His description of the Loimos or Febris Loimodes is found to have omitted the appearances peculiarly characteristic of the proper pestilential fever, buboes and carbuncles; while it notices the existence of *ulcerative, anthrax-like, herpetic exanthemata* on the *face* and the *rest of the body*:—and observations present themselves in all the writers on Small-pox from Rhazes to Sydenham, similar to those made by Herodotus on these eruptions. (pp. 29, 32, notes.)

Rufus, a celebrated physician of Ephesus, a few years posterior to Herodotus, is, in the fragments preserved of his works, in like manner silent with regard to the appearance of buboes or carbuncles in the Loimos. His relation of it, however, includes symptoms of different diseases; stating in particular, that,

" besides other evil ulcers, the all-dreadful *Anthrakodea* (ἑλκῆ ἀνθρακώδη) may take place in the Loimos, *as well on the rest of the body,* as on the *face and tonsils.* (p. 27.)

Galen, the author proceeds to state, (p. 34, 35,) has not given a distinct history of any disease, or set of diseases, entitled Loimos. But he has made numerous, though scattered, observations on them throughout his works, and from these several extracts are produced in support of Dr. Willan's arguments. In the pestilential disease to which Galen chiefly refers, which was introduced into Asia Minor, Syria, and Italy, by the army of Lucius Verus on its return from Parthia about the year of the Christian æra, 164, no mention is made of buboes or other glandular swellings. There is farther, a striking similarity observable between the appearances and circumstances of this Loimos, as narrated by Galen, and those attributed to the confluent Small-pox and Measles, by a multitude of authors antient and modern.

1. When the disease was about to terminate favourably, *numerous exanthemata appeared over the whole body, which in the greater number of patients were ulcerative or pustular.*— 2. The disease was occasionally attended

with roughness and hoarseness of the voice.—3. A distinction is carefully made between two species of the exanthema, which is precisely answerable to the long-recognized and universally known difference between the eruptions in Small-pox and Measles. (pp. 38, 45, and notes to 46).—4. The sudden retrocession of pustules or tubercles efflorescing from within, rendered the case highly dangerous.—5. Almost all who perished, died of colliquative diarrhœa.—6. So great was the deformity produced in the persons of the sufferers by the ravages of the epidemic Anthrakes in Asia, that they were compared by the spectators to apes, rather than men. Parallel passages are concurrently cited from numerous writers of different periods, in which the several characters lastly enumerated, are applied, and sometimes in almost the same terms, to the Small-pox and Measles. To the evidence furnished by Galen's writings, is to be added, that he does not anywhere hint that the Loimos observed by him at Rome, was a new disease; but, on the contrary, speaks of former visitations of it, and of the Anthrakes having been very destructive in the time of Asclepiades.

The chapter concludes by quoting a pas-

sage from Dion Cassius's Roman History, affording a presumption that some mode of inoculation had been attempted in the reign of Domitian, (A. D. 92,) and revived in that of Commodus.

In the third chapter is collected additional evidence of various kinds, auxiliary to the design of the work, referable to different periods before the Christian æra.

Hippocrates enumerates *Anthrakes* in the list of diseases occurring under a pestilential constitution. (p. 52.) His account of the Anthrakes (p. 53,) applies more strictly to the Small-pox than it does to carbuncles, and agrees in its details and manner of expression with passages previously quoted from Herodotus, Galen, and Philo, apparently relating to the variolous eruption. The distinction long supposed to exist between the confluent vesicular Small-pox, looked upon as a branch of the Loimos, and the distinct and coherent Variolæ, classed with Phlyzacia, Ecthymata, Lichenes agrii, &c. is traced up to the writings of Hippocrates in several passages of his "Epidemics." (pp. 53, 54.)

After a slight notice of the testimonies to the prevalence of Loimos (understood in the general and popular sense) among the several

nations of Greece from the earliest times, and the Syrians, Jews, and Egyptians, the author enters into a minute examination of the authorities in support of a similar conclusion in regard to Rome in its regal and republican states. In the absence of any correct information from Roman physicians, the almost sole guides in such an investigation were the historians and poets, (p. 78, and note). Among the former the terms Pestis and Pestilentia were used in the same extensive signification as Loimos and Loimiké by the Greeks, comprising every contagious, epidemical disease. This is established by references to the works of Julius Cæsar, Livy, Ammianus Marcellinus, and Vegetius. (pp. 59, 60, and note.)

If, therefore, diseases are found recorded in Roman history under these or similar denominations, with epithets, adjuncts, and characters not appertaining to the pestilential Bubo, nor to epidemics caused by famine, but descriptive in different degrees, of the confluent Small-pox, we are justified in presuming that the diseases so described were, in some instances, at least, the confluent Small-pox.

The name Ignis sacer, like Pestis, appears

to have been used in a very extensive signification by the antient Romans. It was applied indiscriminately to *febrile eruptive* complaints; and Pliny says there are several kinds of it. (pp. 78, 81). The arguments therefore employed relative to the use of the word Pestis, may be adopted with equal force respecting the use of the word Ignis sacer; and wherever the malady so termed is represented with the appearances and characters of Small-pox, it is reasonable to conclude that it is the latter disease which is the subject of the description.

It is then shewn that Lucretius describes the Ignis sacer in language sufficiently expressive of the leading properties of the Small-pox;—that Virgil does the same;—that Columella applies the term to the Sheep-pox, or Pusula pecudum; (the strict resemblance between which complaint, and Small-pox affecting the human subject, is pointed out, p. 80, note;) and that a diffuse account of the circumstances of the distemper by Seneca, (p. 81, note,) very nearly agrees with those of the Small-pox or Measles. The natural deduction from these passages receives considerable confirmation from the considerations that Ruffinus translates the

Anthrax of Eusebius, *Ignis sacer*, (p. 82,) and that Constantinus Africanus specifies the disease so called, in language applicable to the confluent Small-pox. (p. 83.)

Of the fourth chapter, a large part is dedicated to the purpose of controverting the position of Baron Dimsdale and others, "that the Small-pox was imported from Asia at the time of the Crusades, and made its first appearance in Europe about the thirteenth century." (p. 104.)

Such an opinion is proved to be destitute of any foundation;—"from the frequent recurrence" (as had been noted by M. Du Fresne) "in the Acta Sanctorum of the terms Variola, Vayrola, Veyrola, Vayrora, Variolus, and Morbus Varicus between the years 800 and 1400; (pp. 100, 101;)—and from the numerous passages (quoted pp. 101-2-3,) in M.S. Chronicles and Histories, recognizing the existence of the Small-pox, under its name Variola, in many parts of Europe during the ninth and tenth centuries:—whereas the first crusade was not terminated till the year 1100.

Ascending to more distant times, descriptions of pestilential eruptive diseases prevalent in France, Germany, the Netherlands,

and Italy, during the sixth, seventh, and eighth centuries, under the names of Pusulæ, Pustulæ, Pesulæ, &c. (p. 94,) applicable to the Small-pox, with different degrees of resemblance, up to the most complete, are adduced from Gregory of Tours and other writers. And the existence of the last-mentioned malady in France is traced to a period long anterior to its alleged Arabian origin, by the light derived from a miscellaneous MS. in the British Museum "of the eighth or ninth century, partly Saxon, partly Latin; in which it is said that St. Nicaise, Bishop of Rheims, and a martyr, A. D. 453, had been affected with a species of *Variola.*" (p. 96.)

With respect to Britain, the completion of the design of converting the island to Christianity under the auspices of Pope Gregory I. (p. 108, and note,) led to such frequent intercourse with Italy, France, and Belgium, that the epidemical and contagious disease prevailing in France at the close of the sixth century, (as stated in the work, p. 87,) and which has been considered to have been the Small-pox, was necessarily communicated from time to time, through the Heptarchy. The establishment of religious houses contributed to the more ready propagation and

extension of the disease. Instances of this kind are particularized from Bede, relating to various abbies and monasteries. (pp. 109, 110.)

The treatise concludes with a description from Adomnan, a learned Hibernian Scot, of an *eruptive epidemical* disease in Ireland, attended with *purulent ulcerations*, which raged contemporaneously with the pustular Lues in France, mentioned by Gregory of Tours.

It will be seen, that in conducting this Inquiry, Dr. Willan has not rested satisfied with consulting the ordinary sources of information on such subjects;—the writings of medical authors;—but that he has also taken a comprehensive view of the works of the historians, the poets, and the ecclesiastical writers of antiquity. From these authorities combined, he has accumulated a mass of probable evidence, (for were demonstrative proofs possible to be obtained, no room for such an investigation could have existed,) which, whatever weight might be due to the parts of which it is composed, considered singly,—yet taken collectively, tends unanswerably and irresistibly to establish his position, that the Smallpox, Measles, and Scarlet Fever, have pre-

vailed in almost every age of the world, of which history or tradition has furnished us with any records.

It only remains to say a few words respecting the middle and concluding portions of the volume. Dr. Willan's Reports on the Diseases in London present a series of periodical lists of diseases prevalent in the metropolis, as occurring under his immediate observation, during five years of his extensive practice, private as well as public. This work abounds with valuable suggestions on diagnosis, and important practical precepts, and contains many original pathological observations. It has now been some years out of print, and it is presumed that its re-publication will not be unacceptable to the Profession. No apology, it is hoped, will be deemed requisite for collecting, at the same time, some Papers, contributed by the author to different periodical publications connected with medicine, and of which new editions are not likely to appear.

Finally, it may not be improper to mention, that such references to other authors as remained to be supplied in the posthumous portion of the volume, are placed within

brackets; and that the few notes added in illustration of particular passages, are marked with the initials of the editor.

Whatever opinion may be formed of his qualifications for the office he has undertaken, no one, he presumes, will doubt that, in discharging it, he has been animated by a sincere and zealous desire to do justice to the labours of a relative and friend, whom he honoured and revered while living, and the memory of whose virtues and talents he can never cease to cherish.

A. S.

10, Bloomsbury Square,
November 1, 1821.

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Page 15. Note †. insert the *author's* initials at the end of the third paragraph; and in the last line below *for* vis *read* bis.
—— 19. Note ‡. *dele* Lib. *after* Commun. Loc. Med.
—— 160. Note, line 9. *for* analagous *read* analogous.
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AN INQUIRY

INTO THE

ANTIQUITY OF THE SMALL-POX,

MEASLES, AND SCARLET FEVER.

AN

INQUIRY,

&c. &c.

CHAPTER I.

Vestiges of the Small-pox between the third and seventh Century.

THE first distinct and regular account of the Small-pox was given by physicians who had practised in Egypt and Syria; but the earliest writers on the subject do not speak of the disease, as either new or unusual at the close of the sixth century, the time assigned by European historians for its primary appearance*. About the year 900, Rhazes, an eminent physician at Bagdad, wrote an express treatise on the Small-pox,

* See Mead, De Variolis, page 3; and Woodville's History of Inoculation, Introd.

We cannot attach much credit to the Arabian manuscript, quoted by Dr. Reiske, but without a date, without a title, without the name of the author, and without any collateral authority.

and collected observations from the best authors then extant, without being able to obtain the smallest information respecting its *origin*. Far from conceiving, after his long investigation, that it was a disease of modern date, he satisfied himself it existed in the second century, and was well known to Galen, though he expresses some surprise on finding that a writer so learned and voluminous should have treated of it only in a cursory manner*.

Since Aaron, a physician and presbyter of Alexandria, A. D. 620, and the first oriental writer quoted by Rhazes, has arranged the Small-pox, Measles, and the pestilential Bubo or Carbuncle, as the products of one specific contagion, we might reasonably expect to find some hints respecting the variolous eruption in the accounts of Pestilences† occurring

* De Variolis et Morbillis, cap. i.

† In the following pages, the word Pestilence is constantly used in the sense established by modern nosologists. Pestis may be thus defined nearly in the words of Linnæus: Febris synocha (contagiosa) acutissima, funestissima; vertigo, anxietas, lipyria; bubones, sive anthraces gangrenosi.—The disease to which the whole of this definition applies, is called in the Scriptures *Deber Mitaraim*, or "Pestilence after the manner of Egypt," Amos iv. 10. Jer. xlii, &c.

There is another form of Pestilence, which proves fatal in

before his time. Impressed with such an idea, I was led to examine attentively the statements on the subject, published between the first and sixth centuries.

A pestilential disease, with an eruption of anthrakes or carbuncles over the whole body, which appeared in Syria during the reign of Dioclesian, has been particularly mentioned by historians. Another Loimos, or Pestilence, noticed by all, began in the fifteenth year of the reign of Justinian, and continued fifty-two years, spreading from Constantinople far beyond the boundaries of the Roman empire.

The Greek physicians of the fourth, fifth, or sixth century, do not describe the above

less than three days, under the first symptoms mentioned in the definition, without any appearance of glandular tumors. In some cases, the persons infected die suddenly, even without symptoms of fever. This is, according to Scripture, Deber by the destroying angel. See 2 Sam. xxiv. 15. and 2 Kings xix. 35.

The pestilential sweating-sickness in the 15th and 16th century proved fatal in twenty-four hours. Verulam, Hist. of Henry VII. Holinshed, vol. viii. Sydenham observes, Hæc repentina exanimatio nisi in pestis admodum funestæ exordio vix contingit. Page 73.

The term *Loimos*, among the Greeks, originally perhaps expressed the same as the oriental word Deber; but it was afterwards applied to every epidemic and fatal distemper, especially to that connected with famine.

epidemics, nor have they transmitted to us any of their own observations on Pestilence in general; we must, therefore, principally have recourse to ecclesiastical writers and historians. In the general consternation excited by pestilential or contagious diseases, the Christians of Antioch and Alexandria first ventured to regard with a steady eye the objects of distress, and to fulfil the duties of humanity. They exhibited, to their persecutors, the effects of the new dispensation on the minds of men, and exemplified by their practice the tenets of that Gospel which had been vainly proscribed by imperial edicts. Confident of divine protection, though surrounded by every species of misery and danger, they not only buried the heaps of dead, but visited, comforted, and ministered to the languishing and dying survivors. Thus, by their persevering zeal, they saved the lives of many thousands, and finally triumphed over the most direful of human calamities *.

In performing the arduous task they had undertaken, the members of the Christian church observed many interesting particulars.

* Euseb. Hist. Ecclesiast. lib. vii and ix. Nicephori Callisti Hist. Eccl. lib. vi. cap. 21. Cyprian, De Mortalitate, &c. &c.

Firstly. Most of those persons survived who took the disease, not only without fear, but with secret exultation, considering death as a blessed martyrdom *, when occasioned by the performance of duties to their Pagan neighbours, lately their unrelenting persecutors.

The unbelievers themselves, forsaken in the first stage of the complaint by their dearest friends, uncheered by hopes either present or future, and unsupported by any fixed principle, sunk into a listless despondency, soon terminating in death.

Secondly. Several of the Christians at Antioch, after their recovery, again engaged themselves in constant attendance on the sick, but were not affected by the contagion a second time.

Thirdly. What is of the greatest importance, the mortality witnessed was not occasioned by one and the same disease.

In Syria, A. D. 302, the epidemic Loimos seems to have been that connected with famine; besides which there was, according to Eusebius, "an inroad or attack † of a *certain*

* Istud mortis genus nihil a martyrii splendore abesse videbatur. Eusebius Hist. Ecclesiast. lib. vii. cap. 17.

† ἐπιφοράν.

other disease of the ulcerative kind, commonly but properly enough denominated, from its fiery nature, Anthrax; which, spreading over the whole bodies of the sufferers, rendered their situation highly dangerous in all respects; but, by particularly affecting the eyes in most cases, it produced blindness in some thousands of men, women, and children *."

The account of this pestilential disorder by George Cedrenus †, though somewhat differently expressed, appears to have been copied from that of Eusebius; he says, "At this time, almost every evil that can be enumerated, fell upon men. Famine, Loimos, and drought, with the misfortune ‡ of a certain other disorder:—it was an ulcer, the denomination of which was answerable to its affinity with the fiery Anthrax ‖ spreading over the

* Eusebii Hist. Eccles. lib. ix. cap. 8. p. 448. Reading, Cantabrigiæ, 1720.

† Histor. Compendium, p. 266.

‡ Μοῖρα, "distribution," "allotment."

‖ Ἕλκος δέ ἦν, φερωνύμως τῇ πυρώδει ἕνεκεν Ἀνθρακ προσαγορευόμενον ὁ καθ' ὅλων μὲν ἕρπων τῶν σωμάτων, &c. Reading's edition of Eusebius, and that of R. Stephens, Parisiis, 1544.

Ἕλκος δέ ἦν φερωνύμως τῇ πυρώδει ἄνθρακος λεγόμενον, καθ' ὅλον μὲν ἕρπον τὸ σῶμα, &c. &c. Cedrenus, Parisiis, 1657.

The reading in both these texts should be φερωνύμως τῇ πυρώδει ἄνθρακος Ἀνθρακ προσαγορευόμενον or λεγόμενον. It

whole body. It proved highly dangerous in all respects to the persons affected; but, by a particular determination to the eyes in most cases, it produced blindness in thousands of men, women, and children."

Nicephorus Callistus, though he wrote many years after the authors above quoted, deserves some consideration. He says, "The *unusual* disease which accompanied the Loimos originating from famine, was called *Anthrax* on account of its *fiery* colour;" and observes, that "it was an ulceration attracting or draining out humours with an intolerable stench, ἕλκος δυσώδες ἐπισυρόμενον*, which, in spreading over the bodies† of patients, was often productive of great danger, and,

seems to have been a common fault in copyists, where a word is immediately repeated, to omit the repetition, a mistake being perhaps imputed to the preceding writer, and little attention paid to the context.

Nicephorus (Eccles. Hist. vii.) in quoting Eusebius, probably found χρῶμαῖος in the MS. not ενεκεν.

* The word επισυρομενον refers to the antient hypothesis respecting a power inherent in every organ of the body by which it attracted, assimilated, and retained or discharged, the humour suitable to its own nature and conformation, whether in a healthy or diseased state.—See Galen, De Nat. fac. lib. i. & iii.

† καθέρπον τῶν σωμάτων.

when it affected with violence the eye-lids (κανθοι), occasioned blindness both in males and females."

We are further informed by Eusebius and Cedrenus, that the army of Galerius, in Armenia, was affected with pestilential disorders, which extended to every city in the eastern provinces, and even to villages and lone houses —that the mortality among the poor was not so much owing to contagion, as to famine or improper food, many of them having been obliged to eat hay, grass, and roots, &c.; that the rich, though well provided, and residing in detached habitations, were nevertheless reached by some *pestilential* or *contagious* disease, and carried off in great numbers. According to Cedrenus, the Emperor (Dioclesian) himself died of the disorder above described: "He was affected with severe pains over the whole body; a violent phlogosis preyed on his inward parts, and his flesh melted like wax. In the progress of the complaint he became totally blind; his throat and tongue were putrefied, so that worms came from his mouth, and he emitted an odour not less offensive than that of dead bodies in the sepulchres."

On considering all the circumstances direct and collateral, and on comparing them with

the account of Pestilence above given, I am led to conclude that the *spreading* or *herpetic Anthrax*, distinguished by Eusebius from the general Loimos, was the *Small-pox*, chiefly in its confluent form*. The description given does not coincide with that of any other disease; and, if we compare it with the account of Small-pox by the first extant author who mentions the disease under a specific name (page 2), we shall find the learned Bishop of Cæsarea much more correct than the medical presbyter. Aaron says, " Anthrax is a hot, and epidemical apostem, arising in the groin and axilla, and often fatal on the fourth or fifth day. The Flitrax, or black Anthrax, is

* Dr. Cleghorn's statement respecting the pestilential Small-pox, (Dis. of Minorca, p. 276,) should be collated with the whole account given above, the climate and mode of life in Minorca not being very different from those in Asia Minor. Cedrenus's account of the death of Dioclesian (page 8), though not technically accurate, depicts in a lively manner the sufferings of an adult, under the worst species of Small-pox. The appearance on the surface as of melted wax, deliquiating from the burning flesh, is highly characteristic. Rhazes compares it to that of fat or suet (p. 193); he also mentions the stench in the confluent eruption; Dico, variolæ fiunt ex ebullitione sanguinis, et accidit cum eis caliditas violenta et malus odor; et hoc est cum patiens est calidæ complexionis, &c. Page 256, Channing's Rhazes, 1st edition.

malignant: possibly that which is red may destroy, but no one can escape from that which is black or green. The latter is of the same nature* as the Small-pox and Measles, and all other appearances of that colour upon the skin: they stand in the highest degree of malignity. Those of a saffron colour are dangerous, but of less malignity; those which are white, are safe; the red, generally so. All of them originate from adust blood and yellow bile."

The particular effect of the variolous eruption on the eyes is noticed by all the Arabian medical writers†. Judæus, who lived a few years after Aaron, makes the following obser-

* *Simile est.*—Dr. Alexander Russell's observations on the Pestilence at Aleppo, in the last century, may justify the timid practitioners of ancient times, who confounded together two specific contagious diseases, the effects of which they had but seen transitorily, and with averted eyes (page 4). He says, "the carbuncle at first resembled an angry confluent pock in its inflammatory stage," &c. Pustules of another kind were observed in some patients: "the eruption," he says, "was not surrounded with any livid or discoloured circle, but was filled with well-concocted matter; and drying up after a certain time, the crust fell off as in the distinct Small-pox." On the Diseases at Aleppo, ch. iv.

† Rhazes himself remarks: Oportet simul ac Variolarum signa apparuerint, ut de oculo præcipuè curemus. De Variol. cap. vii. p. 107, Channing's edition.

vation:—" Whoever can prevent the Small-pox from approaching the eyes, or by any means defend them from it, or can disperse the pocks when they appear in the eye, so that no harm shall ensue, he is truly an expert and sagacious practitioner." If this cannot be accomplished, Rhazes says, the pustules on the eye are succeeded by an albugo, which produces blindness, by rendering the cornea white and opaque*.

Various Loimoi, or Pestilentiæ, are said to have infested the provinces of the Roman empire, especially the great cities, throughout the fourth and the two following centuries†. There is every reason to suppose that some of the plagues (Loimoi) of the third century‡ were similar to that in Syria above

* So Chesneau, Obs. Med. p. 485. Inevitabilis enim est, visus amissio, si variola aliqua in pupilla oriatur.

Dr. Russell notices as remarkable a case of plague, in which the *sight* suffered injury. He says, " In one instance of a carbuncle on the eye-brow, the gangrene spreading upon the globe of the eye, had destroyed part of it." On the Plague, p. 131.—A. S.

† Viz. under Galerius, Constantine, Constans, Julian, Jovian, Valentinian, Gratian, Arcadius, Honorius, the Theodosii, Martian, Leo, Zeno, and Justinian.

‡ Under Caracalla, Heliogabalus, Alexander, Maximin, Gordian, Decius, Gallus, Valerian, Gallienus, Claudius, and Aurelian.

described. The epidemic, which spread for twelve or fifteen years, in the time of Gallus, Valerian, and Gallienus, began, A. D. 252, at Alexandria, where, according to the statement of circumstances, and the dreadful mortality, we might suppose the actual Pestilence prevailed; but, on comparing the quotations below* with numerous remarks made by

* Quatenûs ad profligandas ecclesias edicta Decii cucurrerent eâtenus *incredibilium morborum pestis* extenditur nam nulla fere provincia Romana, nulla civitas, nulla domus fuit, quæ non illâ generali pestilentiâ correpta atque vastata sit. Orosii Hist. lib. vii. c. 21.

According to Cedrenus, there were, in the time of Valerian, singular exhalations and dews, which resembled the ichors of dead bodies. "Hence," he says, constant Loimoi, with other severe and unmanageable disorders, (βαρέα καὶ ἀνίατα νοσήματα,) which destroyed multitudes of the people. Hist. Compend. p. 257.

Nicephorus informs us, that in the last year of Julian, all the grain and fruit perished by a drought, which tainted the air, and thus destroyed the people. A famine succeeded; and, under the pressure of it, men were reduced to eat the food stored for brute animals. This famine was further accompanied by another species of Loimos, which proved highly injurious to the constitution, generating various and fatal distempers. Hist. Eccles. lib. x. cap. 35. Compare Zonaras, lib. 1.

Orosius likewise distinguishes Loimos as arising from the state of the earth, and its productions, or from the atmosphere: Post damna bellorum inducias relaxatas, diversæ

authors, we shall find that, in other districts, the diseases, though referred to the same pestilential diathesis, were of very different kinds, as Dysentery, Ignis Sacer or Scurvy, Typhomania, remittent and contagious Fevers.

The destructive Loimos (page 3), which commenced in the fifteenth year of Justinian (A. D. 540), and ravaged the greater part of Europe and Asia for more than half a century, was only noticed at first as the Pestilence under its usual form. Dr. Freind* has translated† at large the singular account given by Procopius, of the disease soon after its appearance at Constantinople. It was attended with a violent fever, with coma, or phrenitis, and with tumors in the groin or in the axillæ, or behind the ears, &c. &c. Procopius says, the physicians laid open, after the patient's death, some of the buboes, and thus detected the dreadful appearance of an adhering Anthrax‡.

pestes, cœlo terrâque excandescentes incessabili infestatione corrumpebant. Hist. Rom. lib. ii. c. 13.

* History of Physic, vol. i. p. 144.

† Dr. Freind *transcribes* Dr. Howell's *translation* of Procopius's account of this Pestilence, which is said to have "destroyed in a manner the whole world." See Howell's Inst. of Gen. History, part iii. ch. xi. p. 109.—A. S.

‡ Ἄνθρακος δεινόν τί χρῆμα ἐκπεφύκος. Compare Russell on the Plague, p. 131. In the real Pestilence, the antients do

This observation proves how much the Carbuncle, or Anthrax, connected with the Bubo-fever, differed from the Anthrakes diffused over the whole surface of the body in the epidemic described by Eusebius.

Agathias's statement is similar to that of Procopius. He says, "The disease chiefly affected young men, but not females," and that "it appeared at first in its old form*." We learn, however, from Evagrius†, that the disease, though considered as one and the same epidemic, did not, in the fifty succeeding years, retain the form or symptoms stated by Procopius. Evagrius expressly says, "The complaint (παθος) consisted of different disorders‡. In a few persons (ενιοις), beginning from the head, and producing redness in the eyes, with a swelled face§, it descended into the throat, and removed them from among men. In others there was a violent flux‖. In *some*, buboes arose, and from them most untoward fevers; but some persons died on

not seem to have discriminated between Anthrax and Bubo. See the quotation from Aaron, p. 10, with which many passages in the writings of the Greek physicians coincide.

* Ἰδέᾳ πρεσβύτερα ἐλυγχάνεν οὖσα, &c.

† Eccles. Histor. l. iv. c. 29.

‡ Ἐκ διάφορων νοσημάτων συνεκέιτο.

§ Ὀφθαλμοῦς αἱματωδεῖς, καὶ πρόσωπον οἰδάνον.

‖ Γαστέρος ῥυσίς.

the second or third day, without either mental or bodily suffering. Others, becoming comatose, resigned their life; and a sudden eruption of anthrakes destroyed multitudes of the people*." Evagrius himself had been affected with the disease while at school. Afterwards, in the visitations of the different disorders mentioned, he lost his wife, several of his children, his hinds, and his favourite slaves†. He seems to have been well acquainted with the nature of contagion, and the operation of fomites; for he very correctly enumerates the various modes in which pestilential or contagious diseases are disseminated. The above pestilential constitution was, in his opinion, the longest on record, the next to it

* Καὶ ἄνθρακες δὲ ἐξαλλόμενοι τοὺς ἀνθρώπους ἠφανίζον.

† According to Evagrius, some individuals, who had been once or twice affected with the Loimos, and escaped, when they were seized the third time perished.

So Avicenna and others maintain that the Small-pox may be taken more than once. They fell into this error by considering the Small-pox, Measles, pestilential Sore-throat, &c. as generically the same, the offspring of a putrid humour, and only differing as to the degree of putrescency.

Rhazes says, "Possibile est ut accidant Variolæ bis vel ter, et præcipuè cum sanguis est acutus." Channing's edit. p. 256.

It is asserted likewise by John of Gadesden, one of the earliest English medical writers, that the infection may be received a second time: "Aliquando Variolæ vis hominem

being one mentioned by Philostratus, which continued fifteen years. Evagrius's account, though not given with medical precision, evidently comprizes the true Pestilence, the pestilential or scarlet Sore-throat, and the Dysentery, with the Small-pox, and perhaps the Measles. The outstriking carbuncles* contrasted by him, with the slow glandular tumors in Pestilence, must be referred to the Herpetic Anthrax described by Eusebius and others †.

Since this fatal ‡ epidemic continued in Asia till the year 590, it could not fail to reach

invadunt." Rosa Anglica, lib. ii. p. 10043. Aug. Vindel. 1595.

Among the Arabians, Averrhoes is the only author who supports a contrary opinion. Freind's History of Physic, vol. ii. p. 117.—A. S.

* Ἄνθρακες ἐξαλλόμενοι.

† Nicephorus of Antioch, in his account of St. Simeon, Jun. Stylita, mentions this pestilential disease, which, he says, was equally injurious and destructive to men, whether the inhabitants of cities, towns, villages, or retired places. He adds, " that the saint stretched forth supplicatory or propitiatory hands, till the ravages of the disorder ceased," and that " he did not permit it to extend beyond the *wonderful mountain* where he resided."

‡ Some authors calculate that two hundred millions of men perished by it. Mr. Gibbon is willing to admit half the number. He says the reign of Justinian was disgraced, by a visible decrease of the human species, which has never been repaired in some of the fairest countries of the globe. Vol. iv.

the Abyssinians engaged at the siege of Mecca, in the year 569 or 570, at which time it has been asserted by Mead after Dr. Reiske, and by Mr. Bruce after an oriental writer*, the Small-pox primarily commenced (page 1 above). The infection was probably conveyed in goods brought from Suez, and other ports of the Red Sea; for we are told, according to the usual style of Arabian chronicles, that a flock of birds, with lion's faces, came from the sea, and, by letting fall minute pebbles on the Abyssinian soldiers, nearly destroyed the whole army. Hameesy, the author of the Chronicle, explains this allegorical statement, in his concluding observation:—"It was at this time the Small-pox and Measles first broke out in Arabia."

Actuarius, the last of the Greek medical writers, speaks of epidemic Carbuncles (Anthrakes†), but he neither describes the Pestilence nor the Small-pox. On this Dr. Freind observes, "It is very remarkable he treats of no other distempers than what are to be found

* See Bruce's Travels, vol. i. p. 514, and Woodville on Inoculation, p. 13.

† He distinguishes these from the local Anthrax, which he describes in the terms employed by other Greek physicians.

in the other Greek authors; and does not mention any of those diseases, which the Arabians first took notice of, not so much as the Small-pox. The Saracens first brought in this distemper; and wherever their arms prevailed, this spread itself with the same fury in Africa, in Europe, and through the greatest part of Asia, the eastern part especially; and it seems very surprising, that in several hundred years it should never appear in the Grecian empire: as, if we consult not only the physicians, but the historians of that time and nation, we have reason to believe it never did, especially when they never fail to take notice of an earthquake or a plague*."

This circumstance, if authenticated, would have been really surprising; but after a close attention to the subject, I am convinced, the plagues to which Dr. Freind refers were chiefly the epidemic Small-pox. The Small-pox and Measles were denominated by the Greeks, Anthrakes and Loimè†, or Loimic Disease, as in the time of Eusebius, and long before it. The same names were continued in Greece and Asia Minor to the fourteenth

* History of Physic, vol. i. page 274.

† Λοιμη as a synonym of Νοσος λοιμικη is furnished by Hesychius; A. D. 500.

century, and the latter terms are yet employed by the natives. The authority of Haly f. Abbas, of Constantinus Africanus, and others, will confirm what I have just now said. Haly observes, "The Al-gidri (Variolæ) are numerous small ulcerations affecting the whole or the greater part of the surface of the body, which the antients called Anthrakes; but which the (Syrian) Greeks and Arabians called Daughters of Fire *." Constantine, who chiefly acquired his knowledge of medicine in Egypt, Syria, and Persia, though he wrote in the Roman language, and adopted the term Variolæ †, says of the disease, "Antiqui vocant has Ignis carbones, Syri, filias Ignis ‡." Respecting the first appearance of the eruption, he observes, in another place, "nascuntur pruritæ (that is, tingling papulæ) quæ vocantur ignitæ prunæ."

During the period stated by Dr. Freind (page 18), the Small-pox was, by the European Greeks, termed Loimiké. This ap-

* Theorice, lib. viii. cap. 14 and cap. 9.

† This term (Vaiuolo) had been used several centuries before his time, by the Italians, as will appear hereafter.

‡ Commun. Loc. Med. Lib. [Lib. viii. cap. 14. p. 226.] These passages tend to confirm the propriety of the reading in Eusebius's account. Note at page 6.

pears from the Greek version of Rhazes's Treatise on the Al-gidri and Al-hasba (Small-pox and Measles), written in the tenth or beginning of the eleventh century, and dedicated to the reigning Emperor *. The author says in his preface †, "It is confessed by all persons conversant with the writings and laborious researches of Galen, that nothing which pertains to medical science or the cure of diseases has escaped his penetration. With regard to the Loimiké, however, he is less explicit than on other subjects: he speaks of it cursorily, or in connection with analogous complaints, but he does not any where state distinctly the symptoms or appropriate mode of treatment in it." The translator thus proceeds, "It seems strange, that he who first organized the medical art, and defined what had been left indeterminate, should have but slightly noticed a disease, to which every man is born liable;" and he adds, "although since the time of Galen, there have been many physicians eminent for skill in the Greek language and philosophy,

* This work is entitled περὶ λοιμικῆς.

† He entirely omits the preface of Rhazes, which consisted of critical observations respecting Galen's knowledge of the Small-pox, founded, however, on an erroneous translation of his works into Syriac.

yet none of these have ventured to commence a structure, where the great master of the art had not laid a sufficient foundation."—"Wherefore," he says, "not being well supplied with domestic materials, I have translated the beautiful and complete Treatise on the Loimic Disease, written by the sage Rhazes, in the Saracenic diction *. He has divided the subject into fifteen chapters, and has constituted two species of the disorder, which may be entitled Loimiké and Eulogia. The *antients* gave the name 'Eulogia' to the more troublesome species of the two, for so it is generally accounted. At present there is not, in the Greek language, any appellation for it. Rhazes, in his native dialect, terms it Hasbé, which word is, I believe, of precisely the same import as Loimiké. If the two diseases differ in some circumstances †, yet have they a common nature; we need not, therefore, regard accidental differences, in things substantially the same."

This translator's comparative view of the symptoms after a general detail, is more dis-

* The translator, in his title-page, calls it the Syrian language; ἐξελληνίσθεις ἀπὸ τῆς Σύρων διαλεκτῦ.

† Ἐν ταῖς διάθεσεσιν. "Diathesis, apud logicos, est qualitas facilè mobilis a subjecto." [Vide Gorræi Defin. Med.]

tinct than any I have seen in the Latin versions of Rhazes. He says, "When you observe a severe pain in the loins, and startings during sleep, with continued fever, then know that the Loimiké is about to appear. The vomiting, restlessness, and anxiety, which are signs of the Eulogia, do not appear so striking in the Loimiké, unless it be of the worst kind. The great heat of the whole body, and the inflammation, and the burning, and the shining brightness of the colour *, and especially the vivid redness of the fauces, are more usual in the Eulogia."

The Greek translator sometimes denominates the Variolous pustules, exanthemata, but generally phlyctænæ, and twice phymata. He terms the *height* or *turn* of the disorder, paracmé; and the eruption, considered as a

* Σιλπνότης τῆς χροιᾶς. This *crimson gloss* in the skin of swarthy Orientals, added to the state of the throat, tends to prove that the Measles and Scarlatina anginosa were considered by the antients as one and the same disease.—Their hypothesis would countenance them in asserting, as above, that the Eulogia was not less dangerous than the Loimiké or Small-pox, and explains the following passage, which is common to the Greek and Arabian physicians: An eruption of a pale colour is bad; that which is of a dark or violet colour is fatal; but the mildest and safest Eulogia is that which is not very strongly red.

separation of the morbid humour from the blood, he calls *eccrisis.* A partial mortification, after severe pain, when the Loimiké is declining, he terms *sepsis.* Lastly, he says, "These diseases are epidemical, chiefly in pestilential constitutions, occasioned by a putrescent and noxious atmosphere*."

The preceding observations, though not in precise order in respect to time, may serve to elucidate several doubtful passages, both in historians and medical writers of an earlier period.

* Ἐν τοῖς λοιμώδεσι καὶἀστασεσιν τῶν ἀέρων σηπεδονώδων, τῶν μοχθηρῶν, &c.

CHAPTER II.

Small-pox, Measles, and Scarlet Fever, described by authors of the first, second, and third centuries.

HAVING traced the repeated and destructive ravages of an eruptive Fever, often termed Loimos, but wholly different from the Pestilence, for more than three centuries before the acknowledged appearance of the Small-pox, (page 1,) I was induced to inquire whether any vestige of such a disease could be found in the writers, who lived, or recorded events, in the first and second century, and to reexamine the passages in Galen, which have been supposed to refer directly to the Small-pox.

Consideration is due to the following description of a *Loimic Disease* by Philo, the Jewish philosopher, before the middle of the first century. He says, "The cloud of dust suddenly falling on men and cattle, produced over the whole skin a severe and untractable ulceration. The body immediately became tumid, with efflorescences* or purulent

* Ἐξανθησεσιν.

phlyctænæ, which appeared like blisters excited by a secret fire beneath. Men necessarily undergoing much pain and universal soreness from ulceration and inflammation*. suffered not less in body than in mind, by the severe infliction; for a continuous ulcer was observable from head to foot; these eruptions, which were at first sprinkled over the limbs and other parts, finally uniting, so as to form one uniform appearance over the whole†.

On this statement we cannot fail to remark, firstly, how appositely it expresses the mode of diffusion, and the circumstances of the confluent Small-pox; and, secondly, how nearly it agrees, both in particulars and in

* Φλόγωσεως.

† A description of the epidemic Small-pox, in terms very similar to those used by Philo, appears in a writer of the 14th century, quoted by Mombritius, Vitâ St. Marcellini, 20th Apr. T. II. page 755. "Ante aliquot annos, dura quædam infirmitatis procella, per diversas mundi partes intonuerat; cumque partem populi depopulata fuisset, atque Ægyptiacæ vesicæ, plagaque ipsa videatur, unum subitò ex vernaculis Ebredunensis ecclesiæ arripuit," &c. The bishop having anointed this person with oil taken from the lamps (luminaribus) burning at the tomb of St. Marcellin, it is said, the pustules subsided (omnes illæ febrium pustulæ tabuerunt), and the patient's skin became more polished, than it had formerly been.

the terms employed, with Eusebius's account of the epidemical spreading ulcer above quoted. The observations of Philo are intended as a comment on Exodus ix. 9. "It shall be a boil breaking forth into blains." However these terms may be understood in Scripture*, it is clear that Philo delineates a known specific malady, the portrait of which he finishes, by observing, that it should rank among pestilential diseases †, or as the infliction of a tainted atmosphere ‡.

Some fragments are preserved || of the works of Rufus, a celebrated physician at Ephesus in the latter part of the first century. His account of the Loimos, like that of his contemporaries, includes symptoms of different diseases, one of which is an ulcerative or pustular eruption on the face, in the throat, and over the trunk of the body. "In the Loimos," he says, "every thing the most dreadful may occur, and nothing is withheld, as in

* In the Septuagint, ἕλκη φλυκτίδες ἀναζεούσαι, "Ulcers even burning phlyctides": some translators render these terms, "Scabies;" others, "Impetigo," without any seeming propriety.

† Ἐν τοῖς λοιμώδεσι νόσοις.

‡ Πληγὴ ἀπ' ἀέρος καὶ οὐρανοῦ.

|| In Aetii Bibl. Iatric. lib. v. cap. 95.

any of the diseases singly*. The appearances are many and various; there are different kinds of delirium, vomitings of bile, tension of the hypochondria, a sense of anxiety, frequent sweats, coldness of the extremities, bilious diarrhœa, with thin flatulent discharges; the urine, in some thin and watery, in others bilious; in others black, with a bad sediment, and enæoremata of the worst kind; hæmorrhage from the nostrils, heats in the chest, a parched tongue, watchfulness, strong convulsions; and, besides other evil ulcers, the *all-dreadful Anthrakodea*† may take place in the Loimos, as well on the rest of the body, as on the face and tonsils."

Herodotus, a physician of Asia Minor, a few years prior to Rufus, settled at Rome under Domitian or Nerva, and was highly esteemed both as a practitioner and an author. His observations on the treatment of eruptions‡ in the different kinds of fevers, merit

* Ὡς καθ' ἑκαστον νόσημα. He means that the diseases, composing an epidemic Loimos, display a greater degree of malignity than is exhibited by them separately, out of a pestilential constitution. See page 15.

† Καὶ ἀλλα δὲ πόνηρα ἑλκη καὶ ἀνθρακωδη, καὶ πάνδεινα: "those which are of the carbunculous kind and all-dreadful."

‡ Ἐξάνθημαῖα.

our particular attention *. He first mentions the herpetic or vesicular eruption about the nose and lips, considered as a frequent crisis of simple or catarrhal Fever; and, secondly, the Molopes †, resembling flea-bites or gnat-bites, which appear at the commencement of fevers arising from a vitiated state of the humours, and sometimes occur in the Causos or remittent Fever. "In highly malignant ‡ and pestilential Fevers," he says, "the exanthemata are ulcerated ||, and some of them not unlike carbuncles §; but they all denote the redundancy of a corrupt and corrosive humour. Those which appear on the face are the most troublesome ¶ of all; and a great number is worse than a smaller: also, the larger ones ** are worse than those more con-

* See Aetii Tetrab. II. 1. cap. 129.

† He terms these, in another place, *ἐξάνθημαΐα μωλωπίζονΐα.*

‡ "Cacoethes, untoward, untractable." See Foësius, Œconom. Hippoc. and Gorræus, Defin. Med.

Dicitur de morbis qui habent originem a putrilagine quàdam et venenosâ qualitate. Gorræus.

‖ *Ἑλκωδῆ τᾶνΐα γίνεΐαι.*

§ *τινὰ δὲ παραπλήσια Ἀνθράξιν*, "having an *affinity with carbuncles.*"

¶ *κακοηθέστερα πάντων.*

** Compare Rhazes (Channing's edit.), De Variolis et Morbillis, cap. xiv. p. 193.

tracted; and those which suddenly disappear, are worse than those which continue for a longer time *. Those which are inflamed, are much worse than those which only produce itching. Those which arise in a state of costiveness, or when the alvine discharges are moderate, prove favourable; but those which take place with a diarrhœa, or violent vomiting, are bad; if those which supervene in the last case, stay the flux, they are favourable †. These exanthemata are attended with fevers of an untractable ‡ kind, and with great faintness."

It is unnecessary to quote this author's method of treatment in all the exanthemata he describes, which are connected with very different Fevers. At the beginning of the pestilential and Anthrax-like eruption ||, he recommends blood-letting, but afterwards allows the patient a generous diet, in order to

* Et quando Variolæ et Morbilli de improviso, intùs subsidunt postquam cœperint emergere, et cum molestiâ simul accidit deliquium, interitus cito sequetur, nisi erumpant denuò. Rhazes, p. 197.

† Similar observations will be found in all the writers on Small-pox, from Rhazes to Sydenham, and also in Galen, on the eruptive Loimos at Rome. Vide infra.

‡ Παρέπονται κακοήθειαι τῶν πυρετῶν.

|| Επι λοιμώδων καὶ ἀνθρακώδων ἐξανθήμασιν.

support his strength through the fever. He thinks the cerates and ointments employed for Burns may be occasionally useful as external applications*. "The eruptions on the face," he says, "may be soothed by washing with warm water;" he recommends that, on the rest of the body, they should be sponged with diligence, especially when they are of the itching kind. "Should the ulcerations extend in the herpetic form †," he says, "a small portion of quicklime may be added, for it has a wonderful effect in drying, and in obviating their disposition to Noma ‡. If the Noma ||

* Compare Rhazes, Opera Parva, 202. Lugd. 1511.

† Ἐρπυσίμικὰ. This appearance is noticed in the Small-pox by Rhazes: "Variolæ quæ ambulant ut Formica (Herpes) et quæ faciunt superficiem corporis sicut spasmata, malæ sunt et mortales." Divisionum, cap. 159, Op. Parv. pag. 66-7. Gerardo Carmonensi, interprete.

Rhazes has described in another place (De Variolis, cap. 14), white, confluent Variolæ, forming large circles or rings, with an appearance of fat or steatomatous matter under the skin. Channing's edit. p. 193.

‡ τὸ νομώδες αὐτων.

|| Rhazes (cap. ix.), and Avicenna (p. 73, vol. ii.), have noted the tendency to ulceration, at the decline of the Small-pox. Dr. Alexander Russell observes on the Small-pox at Aleppo, "If the sick survived the 11th day, few of them escaped corrosive ulcers with carious bones, or hard swellings in the glandular parts." Oct. 1742. This is not peculiar to hot climates, since it was frequently observed by Dr.

have already begun, cataplasms should be applied, made of lentils, boiled with honey and malicorium, or plantain, or polygonum, or of roses with bread."—" After the *height** or *maturation* of the complaint," he advises, " to evacuate the morbid matter by a suitable purgative, and afterwards to give the theriaca or mithridate, or some other antidote to deadly poisons."

Herodotus next mentions an eruption in Fevers produced by hot sun-shine †, of large white exanthemata, not attended with much itching, which appear chiefly on the thighs, nates, and epigastrium, which do not denote a severe disease, and which are easily curable by light food, with cold water;—also, round, uneven, white or reddish exanthemata, elevated and hard, like Vari, attended with violent itching, so as to preclude sleep, which occur in remittent ‡ Fevers, but may be soon removed by warm-bathing and emollient ap-

Huxham in this country. Variolæ epidemicæ interdum crudo diffluunt ichore, qui subjectam carnem erodit, imò et nonnunquam ipsâ gangrænâ afficit. Julio, 1744.

Compare Pechlini Obs. p. 237, and Amat. Lusitan. Cent. III. cur. xvii. p. 234.

* Παραχμῆς δὲ γενόμενης. Vide supra, p. 23.

† Πυρέλοι ἐγκαυσίλικοὶ. See Galen, De Diff. Feb. L. 1.

‡ Πυρέλοῖς διαλείπουσιν.

plications *. He concludes with the following remarks: "Very red exanthemata are among the worst, yet there is more danger from the livid and black, and puffy, which appear as if the flesh had been artificially scored with black stigmata †, and are very numerous on the face, the breast, the sides, and the back ‡. It is better not to interfere with these at first, but to find excuses for delay, since blame is often imputed to him who undertakes or promises a cure in dubious cases; but if they continue on to the *height* || without becoming worse, the practitioner should not entirely neglect them, however little may be done, but should endea-

* These two forms of febrile eruptions are termed by Hippocrates,

1. "Ecthymata," (De Liquidor. usu,) "broad, not itching, exanthemata." Aph. 9. lib. vi.

2. "Exanthemata, small, red, and round, like Vari." The latter occurred in a remittent Fever on the 8th day, with cold perspiration. See Epidem. lib. i. sec. iii. p. 970.

† See Aët. Tetrab. II. iv. 2. Compare Haly f. Abbas, Theorice, viii. 14: Huxham, Epidem.: and Cleghorn, page 276.

‡ Compare the observations of Aaron, quoted above, page 10. It may be remarked, that the early writers on Small-pox, among the Arabians, have inserted into their accounts of that disease almost every particular contained in this fragment of Herodotus, and have adopted the method of cure proposed by him, in the pestilential eruptive Fever. See Mesue's Practice, and Channing's Rhazes.

|| Μέχρι τῆς ακμῆς.

vour to make some seasonable applications, and conduct his patient according to the rules of art *, while circumstances permit; for those (exanthemata) which, in Necrosis of the surface, arise from beneath †, what can they denote, but that the vital principle is on its passage from within ‡?"

Since Herodotus and Rufus, in their ac-

* Προσθεΐικως. See Gorræi Defin. Med.

† Τὰ γὰρ ἐπὶ νέκρωσει τῆς ἐπιφάνειας γινόμενα, &c. Symptoma est, quicquid præter naturam animali accidit: Επιγέννημα verò, non omne, sed, quod solos morbos necessariò sequitur; vel quæ ipsius morbi augescentis ratione, accidere solet, et non de novo, ut μελαπίπλονία. Gorræi Defin. Med.

‡ This observation is founded on the antient doctrine of the four humours. Haly f. Abbas affords a parallel passage: Quod si sanguini rubigo misceatur, inter ulcera hæc tumores surgunt, in quibus rubigo est similis guttis quæ exustione fiunt ignis; vocanturque hujusmodi Ignis Sacer (Herpes?) et pessimæ sunt Variolæ.—L. viii. cap. 14.

Dr. Huxham uses the word Necrosis, in describing a similar state of the Small-pox.—Jul. 1744 and Oct. 1747.

It is likewise of importance to remark how nearly the last sentence, quoted from Herodotus, coincides with the following passage in Sydenham, De Variol. Anom. Ann. 1670. Inter pustularum congeries, Vesiculæ quædam satis conspicuæ, ambustorum ad instar, sero limpidiore distentæ eminebant, quod quidem disruptâ subinde pelliculâ, copiosè effluebat, subjectâ carne nigredine et sphacelo quasi affectâ. Notandum quod qui diris istis vesiculis ac mortificatione Libitinæ destinabantur, intra paucos dies ab eruptione interibant.—Page 165. Compare Ballon. vol. i. page 172.

counts of the Loimos or Febris Loimodes, have omitted the characteristic appearances of buboes and carbuncles, only observing, that the eruptions diffused over the face and the whole body were somewhat of the nature of carbuncles, or partly resembled them, we may conclude that the disease they describe was not the Pestilence *, but an epidemical, contagious, destructive, and all-dreadful eruptive Fever, of which History affords no parallel but in the Small-pox.

Galen, as was formerly observed, has not given a distinct history of any disease, or set of diseases, entitled Loimos. From his numerous, though scattered, observations respecting them, we may collect that he had not minutely investigated Fevers, which were, he informs us, communicable by the slightest contact with the sick, and fatal to all around them. Danger, in his opinion, arose even from conversing with persons in whose houses there was any fetid or offensive smell †. He professes, however, to have seen *very many* cases of the Loimos ‡. The pestilential dis-

* See note, page 2.

† De Differentia Febrium, L. i. c. 2.

‡ Comment. in Hippoc. Epidem. Lib. iii. and vi. He employs an indefinite number, sexcenti, in expressing this.

order, to which he chiefly refers, was introduced into Asia Minor, Syria, and Italy, by the army of Lucius Verus, on its return from Parthia, about the year 164, and continued * with little remission for several years. No mention being made of buboes, or other glandular swellings in this fever, we cannot rank it with Pestilence, and may therefore inquire how far the circumstances of it, stated by Galen, assimilate with those of the eruptive fever, described by Rufus, Herodotus, and Eusebius.

Respecting the appearances on the skin, we obtain some information from two cases stated, De Methodo Medendi, lib. v. cap. 12. "At the commencement of this great Loimos, the whole body of a young man broke out with ulcerations †, (i. e. pustules,) on the ninth

* Before the year 170, Rome was so depopulated by the disease or the flight of the citizens, that an army was with much difficulty collected to act against the invading Marcomanni.—Jul. Capitolin. Orosius, Tertullian, Arnobius, and Augustin.

† Ἐξηνθήσεν ἕλκεσιν. This expression is similar to one in Hippoc. Aphor. 20. l. iii.: ἐξανθήσιες ἑλκώδεες, "ulcerating efflorescences." The words there employed are translated "Pustulæ," by Celsus, lib. ii. cap. i. Ἕλκεα joined with ἐξανθεῖ likewise signifies "Pustules," in Hippocrates, De Morbo Sacro: Ὁκόσοισι μὲν παιδίοις ἐῶσιν, ἐξανθέι ἕλκεα ἐς τὴν

day, which was the case with almost all who recovered *. On the ninth day, he also began to cough a little; next day, after using the bath, he coughed violently, and expectorated what is called an Ephelkis, from an ulceration in the throat or larynx, as he conceived, having felt much pain in swallowing." On the thirteenth day of the disease, this young man was able to sail down the river to Tabiæ, a place famed for excellent milk, where he was soon restored to health. Galen adds, that many others, similarly affected, likewise recovered. He then states the case of a young man aged eighteen years, who, after being affected some days with a Catarrh, coughed up a little florid blood, apparently with portions of the inner coat of the trachea. His

κεφαλὴν. This refers to an eruption of the pustules termed Achores and Favi, which Pliny entitles "ulcera capitis manantia," and Galen, ἕλκυδρια. De Med. p. sec. loc. ii. 9. Thucydides, in describing a pustular eruption which took place during the plague at Athens, says, τὸ σῶμα μικροῖς ἕλκεσιν ἐξηνθήκος; "the body was broken out with small ulcers." The Greek translator of Rhazes on Small-pox applies the verb ἐξανθεῖν, indifferently to the patient, or to the eruption. Thus he says, Εἰ δὲ καὶ Λοιμικὴν ἐξανθήσουσιν and ὅταν δὲ ἐξανθήσει ἡ Λοιμικὴ.

* The words οἱ σωθέντες, "who recovered," are not found in many MSS.—Editor's marginal note.

voice was hoarse and broken *: he recovered, however, but after a longer time than that mentioned in the former case.

Galen next observes, "Those who are thus affected from the Loimos, appear to me to recover sooner, because the whole body is previously dried, and cleared of morbid humours; for in some of them, vomiting takes place, and the bowels are disordered in all †. After such evacuations, when the disease is about to terminate ‡ favourably, numerous black exanthemata appear over the whole body, which, in the greater number of patients, are ulcerative (or pustular §); but, in all, without much discharge of matter ||. It was evident to those

* Thus Rhazes, "Malitia variolarum est secundum quantitatem malitiæ anhelitûs, et raucedinis vocis," &c. Page 238, Channing's edition; page 121; and Avicenna, tom. ii. page 73—Si vox et anhelitus benè habent, res salva est.

† See Sydenham, De Variolis. Galen says, if the diarrhœa continue, so that black bile be evacuated, death follows immediately, or before the eruption can take place. Compare Avicenna, tom. ii. p. 73.

‡ Τοῖς σώζεσθαι μέλλουσιν. Considering the eruption as a crisis, he supposes the patient has not any chance of life, unless the pustules appear in great numbers. This idea is strongly impressed by the Arabian writers on Small-pox. Haly f. Abbas, l. viii. c. 14. Rhazes, p. 231. Channing's ed.—Avicenna, vol. ii. p. 74. § Ἑλκωδῆ.

|| Πᾶσι δὲ ξῆρα, i. e. (See Gorræi Defin. Med.) the pus or

who made use of their eyes, that the eruption was the residuum of the blood rendered putrid by the fever, which nature had thrown out like ashes, on the surface, as she does many other recremental substances *. Exanthemata of this nature did not require any medicinal applications: they subsided spontaneously in the following manner. In cases where superficial † ulcerations took place, a scab separated, which they call *Ephelkis*, and then the part underneath was found nearly healed, and after a day or two it cicatrized. In other cases, which were not *ulcerative* ‡, the Exanthema was rough and psoroid §, and a kind of scales gradually separated ||, after which the disease entirely ceased."

sanies is removed without the formation of an open ulcer. Compare Haly f. Abbas, Theorice, l. viii. cap. 14; and Huxham, Nov. 1739. Variolæ epidemicæ sessiles prorsùs et subnigræ, sæpe vacuæ omninò, sæpius acri admodum et crudo ichore turgidulæ. Qui evadunt plurimis molestissimis furunculis et ulcusculis infestantur.

* This observation, expressed in nearly the same terms, is applied to the Small-pox by Haly f. Abbas. Theorice, l. viii. c. 14.

† Ἐν οἷς ἠλκώθη τὸ ἐπιπολῆς.

‡ Ἐν οἷς οὐκ ἠλκώθη.

§ Ψωρώδες, i. e. analogous to the *Scaly Tetter*. On Cutaneous Diseases, p. 149.

|| Ἀνεπίπλε δὲ οἷον λέμμα.

Some general remarks made by Galen merit consideration:—"Putrid fevers," he says, "are characterized by an irregular *pulse**, and by a *pungent heat* of the skin, whereas, in this long-continued Loimos, the *pulse* has been *often natural*†, and no increase of heat has been perceptible to the touch, even when the patient felt as if burnt by an internal fire." He says, "the *eye* was much reddened immediately after using the bath," and this, he thinks, a criterion of the disease‡.

* De Differentia Feb. lib. i. cap. 2. and Comment. in lib. vi. Epidem.—Compare Russell on Plague, p. 86.

† De Præsag. ex Pulsu, cap. iv.—Comm. in lib. vi. Epidem.—De Simp. Med. fac. lib. ix.

Respecting *Pestilence*, Dr. Hodges observes, "Apertissima signa præsentiam Febris ut plurimùm sat manifestò indicant, qualia nimirùm, inquietudo summa, calor intensissimus foràs,—et intrà, cum siti inexplebili, ariditate et nigritia linguæ, æstu præcordiorum intolerabili, &c. &c. p. 110.

In speaking of the state of the pulse, and heat of the skin, in many cases of Small-pox, Rhazes makes nearly the same observations as Galen has done. Cap. vi. p. 95.

‡ Rhazes (De Variolis, cap. v. & vi. p. 81 & 91, Channing's ed.) has made the same remark, and mentions an aggravation of symptoms, as the effect of the bath, in Small-pox, during the eruptive stage.

Dr. P. Russell observes, that in *Pestilence*, redness and wildness of the eye only take place during an exacerbation.

In representing the *state of the mouth and tongue*, Galen observes, "Many private persons acquired, by experience, more knowledge than physicians. Thus, they paid great attention to the breath; and, from a peculiar fetor of it, they were able to prognosticate a fatal termination of the disease. An appearance within the mouth and fauces was likewise noticed by them, and denominated the *pestilential colour**." Galen takes pains to convince his readers, that physicians knew, and could properly express this appearance; for, in some cases, he says, it was erysipelatous †, and, in others, resembled that of the Herpes Esthiomenos, being gradually

He considers *muddiness of the eye* as peculiar to the disease of which he treats. On Plague, p. 84.

Dr. Alex. Russell says, "In the Small-pox at Aleppo, the bath is supposed to be highly dangerous[a], and is strictly prohibited before the expiration of forty days:—In the Measles, they use the bagnio on the ninth day, to prevent the diarrhœa."

* Χρόα λοιμώδης. † Ἐρυσιπελατώδες.

[a] We are informed by Dr. Winterbottom, in his Account of the native Africans at Sierra Leone, that "from the time of the eruption (in Small-pox), the patient is not washed until the eruption be completed; for they suppose, if cold water were used to wash a person in this disease, it would throw the matter upon the internal parts, and prove fatal." Vol. ii. p. 154.—A. S.

diffused to the adjoining parts, from the place first affected*. "The urine," he says, "was, at first, thin and watery. If afterwards it retained the usual colour, and a white, smooth, equable sediment appeared, a favourable event was certain; but the contrary, if it became dark, either with a livid enæorema floating in it, like a spider's web, or entirely without an enæorema†. The discharges from the bowels were, at the beginning, and during the increase of the disorder, yellow or reddish, and then *black*, like dregs of blood‡. We saw many instances of this kind in the great Loimos, not more in those who were near

* In the true Pestilence, Dr. Russell says, "The tongue often retained its natural appearance, but sometimes it became white and smooth." When it was parched, he observed "two yellow, longitudinal streaks, with an increased redness between them;" but, he adds, "there was not any certainty or regularity in their appearances." Page 83.

† De Præsag. ex Pulsu, cap. iv.

Compare the observations of Rufus, page 27.—Actuarius also says, "The urine becomes black in the malignant ulcerations called Anthrakes."—Meth. Med. lib. i. c. 1 & 3.

Fæces aut urina, in Variolis, lividæ aut nigræ, magnum portendunt periculum. Riverius, [Prax. Med. xvii. 2. p. 694.]

Dr. Pat. Russell says, "The urine in pestilential Fever appears the same as in health,—never very pale, never tinged with blood." On Plague, page 90.

‡ Comment. in Hippoc. Aphorism. 21. lib. iv.

death, than in others. The patients complained of *thirst*, and frequently called for cold water. They were very averse to nourishment; and all those who entirely rejected it, died" *.

In another place, he remarks, that almost all who died, died of a colliquative diarrhœa †.

He does not mention any violent or phrenetical delirium, but merely observes, that, "in the pestilential disease at Rome, the patients forgot their nearest friends, and sometimes themselves;" quoting the expressions of Thucydides ‡.

I have cited from Galen the collateral circumstances of the great Loimos or Plague, which occurred under his own observation,

* De Præsag. ex Pulsu, cap. iv.

† Ἦν δὲ σύνηξις τὰ κενάμενα.—Comm. 3. in iii. Epidem. —See above, page 29 & 37.

Riverius says (Prax. Med. xvii. 2.), Febris persistens, difficultas spirandi, sitis ingens, alvi fluxus aut Dysenteria, periculosas aut lethales Variolas ostendunt.—Ex iis qui hujusmodi alvi fluxu post eruptionem Variolarum corripiuntur, paucissimi evadunt.

According to Dr. Alexander Russell, when coughs and fluxes were added to the appearances quoted page 30, they contributed to put a speedy end to the complicated misery of the sufferers.

‡ De Præsag. ex Pulsu, cap. v.

in order to shew how widely they differ from those of the actual Pestilence described by later and more correct writers. In arguing that he comprized the Small-pox under the title Loimos, we must lay the principal stress upon his statements respecting the eruption. —To the very striking account of it given in the cases quoted above (page 35—37), which perfectly coincides with that of the Variolous eruption, may be added remarks, taken from other parts of Galen's works, confirming the coincidence.—In his Book on the efficacy of Purgatives, he mentions a case in which there appeared suddenly over many parts of the body ulcerating exanthemata of a bad colour *. He prescribed, as usual †, bloodletting, in order to allay the fever, and to discharge some of the tainted blood.—In his Treatise on Black Bile (Cap. iv.), the observations made on a case formerly quoted (page 36—37) are repeated with some modification, and some addition. He says, "Fevers originating from a dry and hot distemperature of the humours, cause the blood to be hot and black. This tedious Plague (Loimos), during

* Ἐξανθήμαΐων ἑλκωδῶν καὶ κακόχροων.

† See above, page 29, Herodotus's practice in the febrile exanthemata.

a long-continued summer, has produced a similar effect; for, in not a few of those who recovered, dark-coloured, bloody excretions * took place, by the lower belly, generally on the ninth day, but sometimes on the seventh or eleventh. There were many different kinds of excretions: some of them very nearly resembled black bile; others were without acrimony, and without any offensive smell; and others in every intermediate degree between the two †.—In patients not harassed by these excretions, the whole body was covered with black exanthemata ‡, and in some cases a kind of scale fell off, so that the eruption was either exsiccated or dispersed § several days before the crisis of the Fever.—Whenever

* Ἔκκρισις τῶν μέλανων. See Gorræi Defin. Med. & Föes. Œconom. Hippocratis.

Compare Herodotus (above page 29), and the Greek translator of Rhazes, page 23.

† These remarks coincide with what was observed by Sydenham, Huxham, &c. as well as by more antient writers on Small-pox.

‡ Variolæ parvæ, atræ, malignæ, jam sæpe cum enormi alvi fluxu subatro. Huxham, De Epidemicis, Aug. 1746.

Pestiferæ semper hæ sunt, quòd cruorem putridum esse, vel maximè solutum denotant: hinc profusæ hæmorrhagiæ, &c.

§ Ξηραινόμενων τὲ καὶ διαφορεμένων: The word ξηραινόμενων, "dried," implies that, in most cases, the exanthemata con-

black bile alone was discharged by stool, the patient died."

In the first Commentary on the Prorrhetics of Hippocrates, he says, if such exanthemata, " or any pustules or tubercles * efflorescing from within †, should retrocede, the case becomes highly dangerous." This observation is also made by Herodotus (page 29), and by almost every writer on the Small-pox and Measles ‡.

We cannot fail to observe how carefully he has, in different places, distinguished the pestilential exanthemata which *ulcerate*, and are succeeded by *small scabs* (Ephelkides), from those which terminate in scurf or scales §.

tained a fluid;—they could not therefore be petechiæ, which neither suppurate nor desquamate.

Διαφόρησις—est humorum per insensiles cutis meatus evaporatio et digestio. Föes. Œconom. Hip.

* Φυμαῖα.

† Ἐκ βάθους ἐξανθήσαντα.

‡ Malæ sunt, cum apparent et absentantur subitò, quia syncopizabit æger, velociter morietur. Rhazes, page 217, and 254. Channing's ed.

He says, page 199, Hoc rarò accidit in albis, &c. so that the observation is most correct in regard to Measles and Scarlatina.

Omnium pessimæ Variolæ, quæ ubi egressæ sunt, confestim evanescunt. Riverius, Prax. Med. xvii. 2.

§ Salmasius, De Ann. Climact. p. 720, and M. Huet

That he is more accurate than the early Arabian writers, we must, I think, further allow, on comparing his statements with the slight distinction made by them between the Measles and Small-pox *.

In his Commentary on the 6th Book of Epidemics, Galen again mentions the predominant feature of the Plague at Rome. He says, "This great Loimos was similar in its *appearance* † to the Plague at Athens in the time of Thucydides, *because* the skin was of a moderate temperature, and of a dark hue—red

(Commentar. de se) assert, that Vettius Valens, an astrologer of Antioch, speaks of ἐκζέσμαῖα and ἐξανθήμαῖα, diseases fatal to children, in terms which must induce us to believe they meant Small-pox, and Measles or Scarlatina. Valens wrote about fifty years before Galen: His Anthologia has not been printed, nor is the MS. in our public Libraries.

* I. f. Serapion says, that, 1. The blood in Measles is hot and attenuated. 2. That the eruptions (Bothor) in it never exceed the size of a millet seed. 3. That they do not break or discharge, but separate in scurf (cortices). 4. That the primary symptoms of fever, with head-ache, flush and redness of the skin, and roughness in the throat, are common to both diseases.—Theorice, lib. viii. cap. 14.

Ait Georgius (Bachtishua): Blactiæ fiunt ex sanguine permixto multâ cholerâ—et Variolæ ex sanguine grosso multæ humiditatis; et ideò invenimus Variolas humidas, et Blactias aridas et siccas.—Channing's Rhazes, 236.

† Ἐν δὲ τῷ μεγάλῳ τούτῳ Λοίμῳ παραπλήσιῳ τὴν ἰδέαν τῷ καλῷ Θουκυδίδην γινόμενῳ, &c. De Simp. Med. fac. l. ix.

or livid, broken out* with *small phlyctænæ and ulcerations.*

He thinks the *Fevers* termed by Hippocrates *Pemphigodes*, and represented by him "as shocking to the sight†," were either the "*Febres Pneumatodes*," in which a pungent vapour seemed to strike those who touched the sick, or "Fevers attended with an eruption of pustules‡." The latter explanation he considers to be more appropriate and suitable to the context, for he found the words (ἰδεῖν) "to sight," retained in copies, where the word (δεινοι) "shocking," was omitted§. He considers the disease as pestilential, with eruptions similar to those mentioned by Thucydides:—In short, he says, it is one of the specific forms of Fever‖.

It may be said, if the Small-pox chiefly constituted the Loimos in the time of Galen, he, after so long an exposure to it in Rome, could not have escaped the contagion. To

* Ἐξηνθήκος. See note, page 35.

† Δεινοὶ ἰδεῖν.

‡ Πυρεῖοὶ μεῖὰ φλυκταινῶν.

§ The sense would then be "Fevers, in their appearance, vesicular."

‖ Ἐσῖὶ γαρ τᾶτ' ἐν τὶ πυρεῖὼν εἶδος. Comment. in lib. vi. Epidem. Hippoc.

this objection his works afford an answer; since it appears (Lib. de Cucurbitulis), that he was affected with the disease before he quitted Asia Minor, and was, as he thought, preserved, with many others, in a very destructive Loimos, by copious bleeding. The practice there was to draw off two pounds of blood, by scarifying and cupping, on the second day of fever, if *no remission appeared.*

Galen himself seems cautious in applying the term Anthrakes to the pestilential* pus-

* Those who attend to Galen's definition of Anthrax as a local tumour, will see that he could not properly comprize under it an eruption, equably diffused over the whole body, and that superficial observers would confound the extended vesicular eruption sometimes preceding a carbuncle, with the eruption of Small-pox, especially of the confluent kind.—His account is as follows: "When there is an afflux of hot and dense blood on any part, it produces a burning ulcer with a slough, and raises all the surrounding flesh into a throbbing and most painful phlegmoné. This kind of complaint is termed *Anthrax:* But when the blood, rushing to the part, is thick, fervid, black, and feculent, with thin ichors intermixed, it excites, on the surface of the skin, phlyctænæ, like those from a burn, which being broken, the sloughy ulcer is found under them:—this also is Anthrax."

Ad Glauconem, lib. ii. De Method. Medendi, l. xiv. cap. x. et De Tumorib. cap. vi.

He uses the word πομφόλυγες, on a similar occasion.—De Diff. Feb. 9. and 10.

tular disease he has described; but we may collect from him that the inhabitants of Asia Minor, his contemporaries, employed the word in that sense, or according to its acceptation by Rufus the Ephesian, by Eusebius, Cedrenus, &c. 100 years afterwards, page 6, and 27. Thus he says, in speaking of the ramifications of the subcutaneous jugular vein; "Putrid diatheses sometimes occasion the skin to separate extensively, so that the naked veins may be clearly seen. This took place frequently, *on every part of the body*, in Asia, during the time of the *epidemic* Anthrakes, which induced those who beheld the sufferers to think them more like apes than men *."

On a close examination of these and other passages, however, it will appear that Galen himself did not always distinguish the local Anthrax from the contagious, epidemical Anthrakes. Thus he says (Meth. Med.), During the Asiatic Anthrakes, the skin was, in some persons, *immediately excoriated* without an appearance of distinct phlyctænæ, and the patches, which were surrounded by a black redness, terminated in sloughy ulcers.—So Amatus Lusitanus, who practised in a warm climate, observes respecting the Small-pox; "Puer Variolis corripi cœpit, ex quibus nonnullæ percurrebant, ut miserum corpusculum, intrà duos dies ferè totum excoriatum reliquerit, quæ quoque aliis evenisse puerulis observavi." P. 234.

* De Venar. et Arteriar. Dissectione, cap. v.

The concluding observation is not applicable to any appearance in the ordinary Pestilence, but it properly enough refers to the deformed state of the human visage, in the *latter* stage of the *confluent Small-pox*, and during convalescence *.

Galen does not any where hint that the eruptive Loimos, observed by him at Rome, was new, or lately brought thither by communication with the eastern countries †. On the contrary, he informs us, the Anthrakes were epidemical, and very destructive in the time of Asclepiades ‡: he likewise mentions a conversation held with an aged Roman physician, who told him the Theriaca had preserved life, in almost every case, when timely administered, and that in many persons it was found a preventive during a former visitation of the Loimos §.

* In confertis Variolis, si nigro vultûs tumori, narium simarum, orisque repandi dehonestamentum jungas, nihil facilè reperies quod Æthiopico vultui, fœdoque μορμολύκειῳ sit affinius.—Pechlini Obs. pag. 236.

† Pliny says, from tradition, or general observation, that the progress of the Plague is from East to West. Lib. vii. cap. 50.

‡ De Compos. Med. per Gen. L. v.

§ Galen, Lib. de Theriaca.

One is almost induced to believe, from a passage in Dion Cassius*, that some mode of inoculation had been attempted in the reign of Domitian (A. D. 92.), and revived under the emperor Commodus. After mentioning the great Pestilence A. D. 189, he adds, "Many died in another way, not only at Rome, but over nearly the whole empire, through the practices of miscreants, who, by means of small poisoned needles, communicated for a reward, the horrid infection so extensively, that no computation could be made of the numbers that perished †."

* Hist. Rom. lib. 62.

† This absurd report is very analogous to the calumnies against our early Inoculators. In one of the first pamphlets published here on Inoculation, it is said, "Not only physicians make havock of mankind for the satisfaction of their judgment in physick, and increase of their experience, but every quack now may be a hireling to the Devil, and, like that banditti in Italy, be ready to do the drudgery of removing heirs, and other obstructing incumbents of many kinds, and to do this under the mask of a cure, inoculating death instead of disease, and making use of an art never before practised, in a manner not foreseen, and by the laws not yet sufficiently guarded against."—See Woodville's History of Inoculation, page 125.

CHAPTER III.

Evidences of the Existence of Small-pox before the Christian Æra.

HIPPOCRATES, in giving a list of the diseases occurring under a pestilential constitution *, says, "In summer, the *Anthrakes* prevailed, and there were other appearances called *Seps* †, with great *Ecthymata*, and great Herpetes in many." Being an Ionian, he probably employs the term Anthrakes, as was usual in Asia Minor, to express a specific eruptive Fever. The probability is confirmed by a passage in the second Book of Epide-

* Κατάστασις λοιμώδης.

† See above, page 23. The Sepsies, Ecthymata, and Herpetes, will then coincide with the Necrosis, the ἐπιγίνομενα and the ἑρπύστικα, in Herodotus's account of pestilential exanthemata. See above, pages 30 and 33; and Rhazes, De Variolis.

I would not, however, contest this, there being so many external points of resemblance between the Ignis Sacer and the Small-pox; as tubercles, vesications, partial gangrene, &c.

mics, which begins thus: "The Anthrakes appeared at Cranon, in a very hot and rainy summer, mostly with a south wind. Ichors collected under the skin, and, being confined, they became hot, and excited itching. Then there arose phlyctænides, such as are caused by fire, and they seemed to burn under the skin."

This specification of the Anthrakes, it must be observed, applies much better to the Small-pox, than it does to Carbuncles, and agrees with other passages * apparently relating to the variolous eruption.

As the Angina maligna was, for many ages, thought generically different from the Scarlatina Febris †, so was the *confluent vesicular Small-pox* deemed a principal branch of the *Loimos*, or *Pestilential Fever*, while the *distinct* and *coherent Variolæ*, with yellowish pustules and a moderate fever, were ranked with Phlyzacia, Ecthymata, Lichenes agrii, &c.—This may be traced up to Hippocrates:—He, as well as Galen, (above, page 47,) speaks of *Pemphigoid* ‡ fevers, Fevers with Phlyc-

* See those quoted from Herodotus and Galen, but especially from Philo, page 24-25.

† On Cutaneous Diseases, page 282.

‡ Lib. vi. Epidem. Sect. I. Aph. 17.

tænæ *, and the Anthrakes, as *pestilential and malignant;* and of another set of Fevers, in which appear *critical, inflamed,* and *suppurative* tubercles, or pustules. Thus he says (Coac. Prænot. sect. 2.), " An eruption of Phlyzacia, over the whole body, in Fevers without remission, may prove fatal, if there be not a formation of matter, especially about the ear."

The Ecthymata †, or pustular eruptions ‡, said to occur, in children, with fever (Epidem. lib. vi. 1. 15.), coincide with the " ulcerating efflorescences," often epidemical at the beginning of summer. See page 35, note.

In the 4th book on Epidemics, he says, " After the setting of the Pleiades, Wind S.W. Fevers appeared, which came to a crisis on the fifth day, some with an interval of one day; the eruptions were rough and vesicular §, like the tops of the Acanthium Lapytum." A little before that time, there were itching eruptions, psoroid and rough, without discharge of humour ||, also the tumefied Li-

* Epidem. Lib. iv. page 1165. Foës.

† See Foës. Œconom. Hippoc.

‡ Ἐκθύσις ἐλκύδριων.

§ Τὰ δὲ φολλικώδεα καὶ ἐπιφλυκταινεόμενα ὅια Ἀκανθιῳ Λαπυτῳ.

|| This agrees with Galen's representation, quoted p. 38.

chenes. "These happened to Capelius, and to the wife of Pythodorus, and began with fever."

The following passages, in the correspondence printed among the works of Hippocrates, also merit our attention. "The Great Artaxerxes, King of Kings, to Pætus, —greeting:—A disease, called Loimiké, hath invaded our armies, and does not yield to any plan of treatment we can devise: wherefore I earnestly request, in consideration of the many presents received from me, and on every account, that if you possess any useful experience, or any invention of your own, or skill derived from any other man, able to heal us, send quickly, I demand it, and scourge away this distemper: for a restless anxiety hath pervaded the multitude, with sighs and groanings, While we do not combat, we are combated, having for our enemy a wild beast, which mars the flock. Many have been wounded, by bitter darts after darts, and the wounds are difficultly healed; —I cannot suggest advice from myself, and have no longer any confidence in my stated counsellors. Put an end to these things, and fail not to communicate good information.— Farewell."

Pætus answers: "Natural aids do not re-

move the epidemial* Loimic affection. Diseases, produced by nature, come to a natural crisis. Epidemical diseases are cured by art, which discerns, according to the rules of art, the changes effected in bodies."

After this subtle disquisition, Pætus recommends Hippocrates as the physician best acquainted with the Loimiké, and therefore most likely to cure it.

The term here employed, in translating into Greek the Persian monarch's letter, is the same as that applied by the Greek translator of Rhazes, to express the Small-pox.—See above, page 20.

Very scanty materials are afforded to those who would extend a research beyond the time of Hippocrates.—Tradition informs us, however, that destructive pestilential diseases existed at every period.

Herodotus† says, an hundred young men, on a religious mission to Delphi, were affected there by the Loimos, and only two of them survived.—In a consecrated place, where the smoke of sacrifice was continually ascending, these youths could not perish by

* Ἐπιδημίαν λοιμικὴ πάθης.

† [Herodotus, Lib. VI. cap. 27.—P. Wesselingii: Amstelodami.]

the disease connected with famine. Being fresh from a secluded island (Chios), they would be very susceptible of contagion, with respect to which, youth, health, and strength, afford not any preservative, but often expose to danger.

The inhabitants of the principal cities of Greece seem to have undergone constant fear and solicitude respecting the Loimos. In order to avert it, the Lacedæmonians sacrificed, annually, a virgin of noble extraction*. —Pausanias mentions the ravages, and terror it had excited, in almost every district of Greece. He also states, that it prevailed in the most early times; for the family of Amphion, king of Thebes, perished,—and nearly a whole tribe was destroyed by it in the reign of Ogyges†.—Sophocles‡ poetically describes its ravages in Bœotia, during the reign of Creon.—According to tradition, the Loimos extended over Greece and Asia Minor soon after the Trojan war§, and also in the time of the Argonautic expedition ‖.—

* Plutarch (ex Aristodemo). The same horrid rite was sometimes celebrated in Rome. Aristid. Rer. Italic. l. 19.

† In Arcadicis, Bœoticis, Atticis, &c.

‡ In the Œdip. Tyrannus.

§ Herodot. in Vitâ Homeri.

‖ Ibid.

From the Scholia on Homer and Lycophron, we learn that Sisyphus, king of Corinth, was very successful in the management of the Loimos*, and that he prevented its appearance in that city, during his reign. The municipal regulations, which must have been necessary to produce this effect, were not imitated either by contemporary or succeeding governments.—Some restraints imposed on individuals, for the benefit and safeguard of the community, rendered, perhaps, the efforts of a judicious and patriotic monarch unpopular.—His salutary plans were opposed as dangerous innovations,—he was declared an enemy of the Gods, because he suppressed diseases, said to be inflicted by them,—and he received indignities, even in the tomb, from his ungrateful countrymen;—for according to their legends, he was doomed, in Hades, to prosecute eternally an arduous, but unavailing labour.—Thus, prejudice triumphed over wisdom and power combined, and the Greeks blindly cherished an error, which occasioned the frequent desolation of their states, and which became so inveterate, that

* The historians use this word in the popular sense, as comprising the Ignis Sacer, and all epidemical contagious Fevers.

they were not awakened from it in a future age of science and extensive investigation.

The Syrian nations, and the Jews*, thought the pestilential diseases with which they were affected, principally originated from their commerce and communication with Egypt.—Such disorders had indeed existed immemorially among the Egyptians, who referred them back even to the æra of the Scythian or Shepherd kings. According to tradition, the armies of the Titans, after having ravaged Asia Minor, Syria, and Egypt, were discomfited in consequence of a pestilential disease, sent among them by the god Hercules†.

The terms *Pestis*, and *Pestilentia*, were used, by the Romans, in the same extensive signification as were Loimos, and Loimödes, by

* The Editor does not think it necessary to apologize for the insertion, in this place, of the following passage, connected as it is with the subject of the present Inquiry, from Dr. Willan's MS. notes: "The *Shechin Poreach*, 'efflorescent or eruptive Shechin,' (Exodus, ix. 9.) corresponds with the Syrian and Ionian Anthrakes, characterized by a fiery eruption over the whole body, as stated by Eusebius, Cedrenus, and Constantinus Africanus.

"The *Shechin rôn*, translated 'Sore Boils,' and in Deut. xxviii. 27. 'the botch of Egypt,' denotes, specifically, the Leprosy in its ulcerative state; but it often expresses imposthumes, and herpetic or other ill-conditioned ulcers."—

† Macrob. Saturnal. l. xx. c. 14.

the Greeks,—and therefore comprised the Necrosis, and the Murrain, besides every contagious, epidemical Fever*.—Julius Cæsar applies the word Pestilentia to express the disease produced by famine, or by the deprivation of suitable and sufficient food†.—In this sense it is also frequently employed by Livy, in the Roman History.—Of the year 451 before Christ, he says, "Fames, Pestilentiaque—fœda homini, fœda pecori, &c."

Ant. Chr. 396. "Tristem hiemem gravis, pestilensque omnibus animalibus æstas excepit, insanabili pernicie."

Ant. Chr. 277. "Urbem adfecit pestilentia, pecudes hominesque, communi strage corripiens, sed præcipuè gravidarum aborti-

* Ammianus Marcellinus, (lib. xix.) includes, under Pestilentiæ, Catarrh, Ophthalmia, Intermittents, and Ardent Fevers.

Vegetius has given a yet more extensive signification to the Malleus Pestilentiæ, a disease in cattle, qui *diverso genere* passionum, emigrans per plures, contagione consumit—Uno quidem vocabulo, *Pestilentia* appellatur sed habet plurimas species: est humidus—siccus—articularis—subrenalis—farciminosus—subtercutaneus—Elephantiasis—mania, &c. Hi omnes morbi contagione sunt pleni, et si unum animal apprehenderint, celeriter ad omnia transeunt, et sic interdum integris armentis afferunt interitus. Lib. iii.

† De Bello Civili, l. ii. 20.—Compare Quint. Curt.

bus formidabilis*."—This effect took place in all animals, and was referred by historians to the want of proper food †.—Thus, every third or fourth year is noted by Livy as *tempus grave*, or *annus pestilens*, and, on some occasions, the distress continued for two or three successive years.—The mortality was referred to the anger of the Gods for national crimes or neglect of observances, to inclement seasons, to vapours blown from unhealthy climates, to poison, and to witchcraft. Under the last impression, several respectable matrons of Rome were, at different times, tried and condemned, on confessions made,—we must suppose,—under torture. The real cause of such frequent calamities was overlooked. Being constantly engaged in war, the Romans did not cultivate the district round their city sufficiently to procure food for half its inhabitants, nor had they any established commercial intercourse with other countries, from which they could be supplied in times of scarcity ‡.

By their perpetual inroads, agriculture was interrupted among all the adjoining nations:

* See below, page 65.

† Oros. Lib. iv.

‡ See Dionys. Halicarn. Hist. Rom. lib. xii. cap. 12.

consequently, when a town surrendered to them, nothing was obtained beyond the empty glory of the act:—the victors were starved with those whom they had vanquished, after the celebration of a barbarous and unmanly triumph.

This far-famed people was often reduced to the necessity of feeding even on grass, leaves, and unwholesome roots, or of consuming the provender stored for cattle, till men and beasts, and, it is said, birds and fishes, perished together, " vulgato per omne genus animalium morbo."

Such deprivations and misery were felt by all except by the patricians, who held, by prescription, the great offices of state, with the annexed emoluments, and claimed a principal part of the plunder taken in war.

Persons of the lower orders being without any stable possession, submitted, under the pressure of famine and disease, to accept occasional supplies from rich patroni among the senators, as a loan, to be repaid, either by services, or in money, with usurious interest. This acceptance placed them and their families in a state of hopeless bondage; for their selfish rulers, being likewise their judges, assumed the power of confining arbitrarily,

and *torturing debtors*, or of selling them to slavery in foreign countries.

If we then abstract from the history of Rome, whether in its regal or consular state, the accounts of external wars, of triumphal or superstitious processions, ovations, exhibitions, and games, with the rhetorical discourses, suggested by historians, but never uttered by the parties, what will the panegyrists of the Romans find, except murmurs, discontent, sedition, and outrage, among the great body of the people,—and, instead of patriotic ardour, in times of danger, the *Pigritia Militandi*, of which Livy so often complains?

The members of an impolitic aristocracy exposed their subjects or bondsmen to all the evils arising from scarcity and want, to Scurvy, Arsura, Necrosis, and Putrid Fevers. They neither applied science, nor exerted themselves in any manner, to prevent the influx, from adjoining states, of the Pestilence, and other destructive contagious diseases, which often extended from the lower class to themselves, exciting general consternation and confusion.

In the 27th year of Romulus, the citizens were affected with a plague, not unlike the Sweating-sickness, since it occasioned sud-

den death without much previous suffering*. Scanty crops, and the death of cattle, proved, in this instance, favourable to the Romans:—The Camerii, taking advantage of their disabled state, marched against them, but were starved out before they could completely invest the city, and prepare the engines requisite for storming it.—Thus nearly was the future mistress of the world strangled in the cradle, and her territory incorporated with that of a petty state of Latium!

Plutarch states, that, in the 8th year of Numa, a pestilential disease, after spreading from place to place† in Italy, at length entered Rome, and made great devastation.—On this occasion, he informs us, the order of priests called *Salii* was instituted. They were appointed to keep the divine bucklers, reported to have fallen from heaven, and considered as a promise of defence against similar calamities. This idea served to pacify and re-assure the people, at that time: however, Pestilentiæ, of different kinds, continued to visit them, under the reigns of Tullus Hostilius and his successors, and during the state of Rome called republican.

* Plutarch, in Romulo.

† Περιϊᾶσα τὴν Ἰταλίαν.

Dionysius of Halicarnassus, who wrote at the beginning of the second century, says, that Tarquin the last king of Rome (Ant. Chr. 508.) sent to the Delphian oracle for instructions respecting the management of the Loimos;—for, he adds, "A certain unusual disease had suddenly attacked children, and destroyed many, but it was most severe in pregnant women, who died, with their infants, under premature labour." (Lib. iv. 69.) In describing similar epidemics, afterwards, (Ant. Chr. 488 and 470,) he observes, "the disease was called *Loimiké**, and that it spread over all Italy, severely affecting men, adolescents, and children, and producing abortion in pregnant women†."

Of the year Ante Chr. 461, Livy observes, that "the season was pestilential, both within the city and in the country." A disease began at Rome, under circumstances similar to those in which the Loimos at Athens was

* In describing different pestilential diseases, he employs, besides Loimiké, the titles Loimos and Phthoros. On one occasion he says, the Volscian cities were desolated by a Phthoros, greater than any before known, either among Greeks or Barbarians.—At Velitræ nine tenths of the citizens perished.—Hist. lib. vii. cap. 12.

† Hist. Rom. lib. ix. cap. 40.—Compare Ramazzini, A. D. 1691.

produced.—All the inhabitants of the adjoining country, through fear of an invasion threatened by the Æqui and Volscians, fled, with their labourers and cattle, into the city. Men and animals being thus crowded together, in hot, close, incommodious sheds, a contagious Fever, introduced by the labourers, was aggravated to the highest degree, and extended to all ranks of people:—"Ministeria invicem ac contagio ipsa vulgabant morbos." The two Consuls, the Augurs, and the Curio Maximus, received the infection, and died*, together with many thousands of ignota capita†.

* Orosius (Hist. Rom. lib. ii. cap. 12.), and after him Paulus Diaconus (Hist. Miscell. lib. i.), remarks on this year, "Although war was for a while suspended, the Pestilentia, which indeed never admits there of a long truce or respite, blazed out with such fury, that heaven itself might seem to be in flames, when the metropolis of nations was burning with so great a fire of diseases. Ebulius and Servilius the consuls, with the greater part of the troops, perished in this Pestilentia, which also destroyed by an unsightly Tabes, many of the nobles, but more of the lowest class, even though a Lues, occurring four years anteriorly, had greatly depopulated the city."

† Dionysius Halicarn. says, that a fourth of the whole senatorial order perished in *this Loimikè*, and that poor persons, and slaves, innumerable, were thrown down the stream of the Tyber.

Ante Chr. 452. Dionysius informs us, that nearly one half of the inhabitants of Rome were, in this year, destroyed by the Loimiké, which was also communicated to the Æqui, Volsci, and Sabines, and produced a great mortality among them. The distress and consternation being general, the land was left uncultivated, and the miseries of famine threatened to overwhelm those who had survived the epidemic disorder.

According to Livy, a similar malady (Pestilentia ingens) appeared during the year Ant. Chr. 362. When the deaths of patricians and the great officers of state are announced, we may conclude the disease was contagious, and not the effect of famine or noxious diet.—The Censors, the Ædiles, the Tribunes, and the celebrated Dictator *Camillus*, died in the Pestilentia of this year.

Orosius and Paulus Diaconus* add to Livy's short account of it, the following observations, taken from more antient writers: "No extremes in the temperature of the air, no predominance of moisture or dryness, no incongruities in the change of seasons—no tainted vapour issuing from the forests of Calabria, with a sudden deleterious effect,—

* Hist. Miscell. lib. ii.

gave rise to this disease. It continued two years with uniform severity, affecting persons of all ages and sexes with a general corruption*, so that they who escaped death were left deformed, and reduced by extreme emaciation†."

Ant. Chr. 409. 381. In these years, milder pestilentiæ occurred, not being the effect of dearth, though they appeared to precede it‡.

Of the year before Christ 208, he likewise observes, "Both the city and country were affected by a severe Pestilentia, which, however, terminated more frequently in chronic, than in destructive diseases."

Ant. Chr. 174. "The Pestilentia, which in the preceding year raged among horned cattle, turned, in this, upon men.—Persons affected were, with difficulty, enabled to pass the seventh day. Those who did survive that period, were entangled with a tedious disorder, chiefly in the quartan form. Slaves

* Tabe.

† Turpi macie exinanitos afflictosque.

‡ Pestilentia coorta minacior quam perniciosior,—defunctâ civitate plurimorum morbis, perpaucis funeribus. Pestilentem annum inopia frugum excepit. Jam fames pestilentiâ tristior erat. Livy, [lib. iv. cap. lii. p. 1075-6. Curante A. Drakenborch, Amst. 1738.]

(servitia) died in such numbers, that their bodies lay unburied along the highways."

Ant. Chr. 434, 433. According to Livy, Pestilentia and dearth prevailed during these two years. Sabellicus has collected some particulars respecting the disease in the former. The summer being remarkably hot, and without rain, the springs and rivers were almost dried up. A great mortality took place among the cattle, from drought, and most of them were affected with Scabies*.—Their diseases were transferred, by contact, at first to slaves and labourers,—but, soon afterwards, he says, the abominable Lues fastened on the citizens.

Italian writers have agreed generally in maintaining the possibility of this communication, and in thinking that the Pestilence, malignant Fever, and putrid Sore-throat, &c.

* The term Scabies is applied to the Mange, and to the Cow-pox. "Scabies jumentis deformem passionem, et, interdum, periculum generat; contagiosa namque est, et transit in plures—cutem, papulis æstuans prurigo pervadit," &c. Vegetius, Lib. iii. cap. 71. Compare Absyrtus and Hierocles, De Med. Veterinar.

Vegetius thinks the fatal Pox (subtercutaneus morbus) should be distinguished from Scabies, "quæ nec necem, nec facilè periculum gregi infert." Lib. i. cap. v.

whether they appeared first in men or cattle, would soon be common to both*.

Fracastorius and Ramazzini argue against this opinion, which was, however, retained without hesitation by the most enlightened authors at the beginning of the seventeenth century, who assure us, that the gangrenous Sore-throat, then very fatal in Spain and Italy, originated among cattle.

From later experience and more correct observations, in almost every part of Europe, it has been ascertained that the febrile contagious diseases of men, and of cattle, are not *interchangeable*.—There is, however, a strong analogy subsisting between them.—According to Ramazzini, the contagious epidemic among cattle, in Lombardy, A. D. 1711, was an eruptive disease, with pustules and tubercles resembling Small-pocks †, both in their appearance and termination. As the disorder took place during a healthy and favourable sea-

* See observations on this subject by Dr. Chisholm; Edinb. Medical Journal, January 1810.

† "Pustulæ quinta vel sexta die per totum corpus erumpentes, et tubercula Variolarum speciem referentia, &c. &c. —Ulcera in radice linguæ, et ad illius latera, vesiculæ sero plenæ." p. 791.

son *, he refers it to the sole operation of contagion, arising from a Dalmatian cow, introduced among the herds of Count Borromèo.

On another occasion, however, he traces this disease to its more remote exciting causes, for such he considers blight and mildew. About the beginning of June 1690, all the legumina and the springing corn were spotted with mildew †. Grapes and other fruits were destroyed, or rendered unfit for use; and the leaves of herbs, shrubs, &c. were eaten to the stems by various insects ‡. —Much rain fell during the first seven months of the year, and after the autumnal Equinox.

"All animals suffered," Ramazzini observes, "even bees and silk-worms perished, and the cicadæ did not sing this year. Swine died of suffocation,—but the greatest destruc-

* "Nulla portenta visa sunt, nulla in herbis et frugibus Rubiginis signa, in fructibus tum æstivis, tum autumnalibus, nullæ notæ deprehensæ," &c.—Ramazz. Op. p. 788.

† "Plantarum folia, &c. parvis maculis nigricantibus distincta, puncticulari morbo laborare videbantur; hinc campi non virentes, sed atrati et fuliginosi; A. D. 1689, rubro colore infecerat fruges hæc lues;—sola loliacea messis." pp. 124 and 130.

‡ Erucæ et bruchi.

tion was among cattle. After they had been ill for some days, Variolæ appeared, as if by a crisis, on the head and neck, and in very many cases produced blindness. Hence the animals, which had escaped the first violence of the disease, finally perished by inanition and wasting *."

This author gives, in another place, a more particular account of the eruption: He says, "It is allowable to assert that the tubercles on the head, neck, and limbs of cattle, were genuine† Variolæ, since they did not at all

* Const. Epidem. p. 176.

† Mr. Holwell, who advocates, on the authority of the *Aughtorrah Bhade* scriptures of the Gentoos, the high antiquity of the Small-pox in India, informs us, that the Bramins "lay it down as a principle, that the immediate cause of the disease exists in the mortal part of every human and *animal* form:" and Mr. H. himself affirms, that "In an epidemic season of the confluent Small-pox, turkeys, Chittygong fowls, Madras capons, and other poultry, were carried off by the disease in great numbers; and have the symptoms usually accompanying every stage of the distemper." He further adds, "I had a favourite parrot that died of it in the year 1744; in him I had a fair opportunity of observing the regular progress of the disorder; he sickened, and had an ardent fever full two days before the eruption, and died on the seventh day of the eruption; on opening him, we found his throat, stomach, and whole channel of the first passages, lined as thick with the pustules as the

differ from the Small-pox in children, with respect to colour, figure, size, contents, or mode of termination, which was by a blackish scab, after suppuration *."

surface of his body, where, for the most part, they rose contiguous, but in other places they ran together." See an Account of the Manner of Inoculating for the Small-pox in the East Indies, pp. 7, 8, and 25.

An apparent connection in the exciting causes of epidemic diseases simultaneously affecting men and animals, may be traced to more recent writers. Dr. Willan remarks (Reports on Diseases of London), that in the spring of 1797, after the abatement of an epidemic Catarrh, "a violent disease fell upon cats, by which many hundreds of those domestic animals perished." Some remarks of a similar tendency are made by Mr. Corbyn, in his Account of the Spasmodic Cholera of India: he says, "I have observed the disease vary by perceptible degrees with the changes of temperature; and as these changes took place, it seemed capable of operating powerfully upon man and beast; and although it cannot cease to be marvellous, yet in the grand army a number of cattle died in the most unaccountable manner." Medico-Chirurgical Transactions, Vol. XI. Part I. pp. 119, 120.—See also the Edinburgh Medical Essays, Vol. II. page 32. A. D. 1737.—A. S.

* Const. Epidem. p. 186.

Dr. Layard's observations are very similar; Philos. Trans. vol. lxx. pp. 543-4.

"The disease among horned cattle, is an eruptive Fever of the Variolous kind;—it bears all the characteristics, symptoms, crisis, and event of the Small-pox; and, whether received by contagion or inoculation, has the same appear-

If we cannot adopt Ramazzini's opinion in the extent he has given to it, we must, at least, admit, that the eruption now well known by the name of Cow-pox, and the Mange, frequently occurring in domesticated quadrupeds *, are transferable to the human skin, and capable of affecting the human constitution.—In endeavouring to account for the origin † of the Small-pox, we might therefore

ances, stages, and determination, except more favourable by inoculation, and with this distinctive and decisive property, that the beast having had the sickness, naturally or artificially, never has it a second time."

* See the author's Treatise on Vaccine Inoculation, page 80.—A. S.

† It would be curious to trace the various theories entertained by authors on this subject. The Arabian notion, which ascribed the origin of the Small-pox to the blood of the mother imbibed by the fœtus in utero, was long received, and seems to have had some influence on medical practice. Thus, M. Chesneau observes, that infants bear bleeding in Small-pox better than adults, because they retain in their veins a larger proportion of maternal blood; and he quotes, in confirmation of his argument, the opinion of Riolanus, that suffering the blood to flow after the division of the funis, will ensure to the child a more benign kind of the disease.—Obs. Med. p. 481.

The production of the Small-pox was subsequently, at different periods, attributed to 'an epidemic constitution,' and 'a dark distempered quality' of the atmosphere; to

assume, with an appearance of reason, that the virus was first produced among cattle, in a state of disease, and communicated to men, when both were closely confined together, under the unfavourable circumstances stated by Livy and Sabellicus; page 66, 69.

This idea could not easily be invalidated or confirmed by present experience, since the modes of warfare are totally changed. In antient times, whenever there was a hostile inroad, the general population of the country, with herds, flocks, and domestic animals, took refuge in walled towns, or strong-holds*, having no sufficient supply of provisions.—

'miasmata floating' in it; to 'unnatural conjunctions and malign influences of the heavenly bodies;' to 'Insects,'—'a morbific acid,'—'corrupted vapours issuing from stagnant waters;' to 'fervid heat,'—'excremental humours;' 'the presence of the Thymus gland;' to 'a poison defiling the spirits,' &c. &c.

See Willis, De Febrib. cap. xv. R. à Fonseca, Cons. Med. p. 322. Forestus, lib. vi. Obs. 44. Th. Craanen, Prax. Med. Ref. p. 439.—Tract. Pathолog. cap. xxx. p. 266—283. Chesneau, Obs. Med. p. 477. Morton, De Feb. inflam. univers. cap. v. p. 69. Waldschmidt, Prax. Med. Rat. Cas. 89. p. 171. Mead, De Variol. et Morbil. c. i. p. 2—9. Prosper Alpinus, De Med. Ægypt. l. 1. c. xiv. p. 55. Linnæus, Amœn. Acad. v. n. 80. Eph. Nat. Cur. Dec. iii. Ann. i. Obs. 55.—A. S.

* 2 Chronic. Ch. xxvi.

If the enemy could not be immediately dislodged, dearth and extreme misery ensued. Virulent and mortal diseases began to rage, and soon rendered the fortresses as desolate as the fields. In such situations, it is not surprising that new combinations or new forms of disease should have occasionally appeared.

Ramazzini applies the title "pestilential" to the diseases affecting men, in the season, which proved so fatal to cattle. These disorders probably coincided with *some* of the *Pestilentiæ* mentioned by Historians, and seem referable to an insufficient diet, with a humid state of the atmosphere, and to universal anxiety. We certainly cannot deduce any specific effect or disease from the Mildew singly considered*.

* Ramazzini thought the Mildew was of an acid nature, so that it might even coagulate the blood. Hence, he says, "Vel subitæ mortes integros greges sustulere, vel obortæ sunt Variolæ, quas ex sanguinis stagnatione fieri, dum in orbem agitur communis est recentiorum opinio."

Hoffman and others refer to Mildew as the cause of particular diseases,—"Febres mali moris." Hoffm. tom. i. pp. 211. 231.

"Febres insolitæ," Brunner in Eph. N. C. Dec. iii. Ann. ii. Obs. 224. Compare Dec. i. Ann. ii. Obs. 112 and 111. Ann. ix. x. Obs. 93.

In 1690, the predominant complaints were Tertians or Semi-tertians—severe in all, but fatal to children under three years of age.—The Purple Scurvy and Petechial Fevers prevailed throughout the two succeeding years: In the latter, there was again an universal blight.

Livy repeatedly employs the expressions "Pestilentia urens," "Pestilentia urebat," "urentis Pestilentiæ malum*," &c. Thus, in the year before Christ 291, when a deputation from Rome waited on the god Æsculapius at Epidaurus, to request his assistance against a virulent distemper—"Pestilentia urens simul urbem et agros: portento similis clades erat." These expressions refer to the state or form of Pestilentia called *Ignis Sacer*, by which the Latin writers, of the middle ages, meant the Arsura and the Dry Gangrene.—Among the antient Romans, *Ignis Sacer* included other diseases. Pliny says

On examining these passages, we do not find any new or unusual form of complaint described, but chiefly malignant Fever, Dysentery, and Scurvy, which Hoffman elsewhere mentions as occurring in sieges, or from the dearth occasioned by locusts, &c. Tom. V. and VI. page 66, and Supplem. Part. 1. and 11. p. 784.

* See Cooper's Dictionary.

there are many kinds of it—"*Ignis Sacri plura sunt genera;*" but he only describes the *Shingles.* Celsus includes under it two forms of the *Ringworm:* he does not give an account of the *pestilential Ignis Sacer,* or of Pestilentiæ in general, being probably unacquainted with them from having adopted his own precautionary maxim—"In Pestilentiâ oportet peregrinari*," &c.

Being destitute of any correct information from Roman physicians †, we can only compare the observations made by historians with what has been said by the poets of Rome.

Lucretius and Virgil comprehend, under the title *Ignis Sacer,* diseases of a much more serious kind than the Herpes, or Ringworm. The former poet, in accounting for the production of Fevers, Ophthalmia, Gout, &c. adds, "There is also the Sacer Ignis, which

* [De Medicina, Lib. I. cap. x.]

† Celsus is the first whose works have been transmitted to us. He lived after the time of Augustus, and may be considered rather as a translator than an original writer.—Since nothing is advanced on his own authority, it has been thought he was, like Pliny, a philosopher rather than a practical physician.—Foreign practitioners, especially Greeks, were most esteemed at Rome, and they became the chief instructors in medical science.

burns the bodies of men, as it spreads, whatever part it hath seized, and creeps over the limbs. The seeds of things are innumerable; and this Earth, and the Sky, contain evil enough, to generate diseases of incalculable violence." Lib. vi. ver. 659.

These observations, it may be said, will apply to the Necrosis,—but a succeeding passage presents a different view of the subject. In the pestilential disease at Athens, he says, "The whole body reddened with vesications (or fiery pustules), as it does when the Ignis Sacer is diffused over the limbs*."

In Virgil, the Ignis Sacer connected with pestis, is likewise characterized by "*burning papulæ*" diffused over the limbs, and a gross fetid exudation (sudor)†.

So Columella, in speaking of the Mentigo,

* Et simul *ulceribus* quasi inustis omne rubere
Corpus, ut est, per membra *sacer* quum diditur *Ignis.*

By these terms Lucretius expresses the *Phlyctænides* resembling the *effects of fire on the skin*, mentioned in Hippocrates's account of the Epidemic at Cranon (see above, page 53,) and the small phlyctænæ, or efflorescing ulcerations in the Loimos at Athens, as stated by Thucydides, page 47.

† Georgic. iii. sub finem.

and Ostigo, a disease among lambs, compares it to the Ignis Sacer, since it covered the whole face with loathsome blotches, and usually proved fatal*. He applies the terms Ignis sacer directly to the Sheep-pox (Pusula Pecudum†), observing; "There is an incurable *Sacer Ignis*, which shepherds call *pusula*. If this be not stopped in the animal first affected, it spreads by contagion, and destroys the whole flock. Fomentations with goat's milk contribute to allay the severity of the burning eruption, but they protract rather than prevent a fatal termination."

Vegetius employs the words Ignis sacer, and Pusula, to express sanious tubercles formed on the backs of horses from the

* Ostigo mortifera lactentibus,
——— quæ, velut Ignis sacer, os,
Atque labra fœdis ulceribus obsidet.
Lib. vii. cap. 5.

† Columella likewise uses the adjective, as "Pecus pusulosa," sheep affected with the pusula or pox.

His account of the disease coincides with that in the Annals of Agriculture, No. 56, by Mr. Westfield, who says, the Sheep-pox is similar to Small-pox, in respect to the period of infection, to its stages, and appearance, and fatality,—and adds, that, when inoculated, it proves a mild disease.—See Med. and Ph. Journal, vol. xii. page 359. A. D. 1804.

irritation of pack-saddles. He says they became scaly or shelly, and prove dangerous.

Thus every febrile pustular eruption is compared by authors to the dreadful, but undefined * *Ignis sacer.*

A poet and philosopher,—the intrepid Seneca,—is the first I can find who has stated the actual symptoms of the disease, so denominated.

While enlarging on Sophocles's account of the Loimos at Thebes (page 57), he uses the following strong expressions; "O new and direful face of death! Worse than death! —An irresistible languor chains the sluggish limbs; a flamy vapour burns the body's citadel, and flushes the cheeks with blood: then *small spots* besprinkle the head; the eyes are *stiffened*, and the *sacred fire* preys on the limbs; the ears tingle; and the dark blood, bursting the veins, distils from the contracted nostrils, while sighs and a heaving breath shake the vitals†."

* Donatus only says, in Æneid. [lib. viii. 345.] - - - - sacri nemus Argileti.—*Sacer*, i. e. crudelis et pessimus; unde et *Ignis* sacer dicitur morbus, qui hominem, perniciosè sequitur.

† O dira novi facies leti!
Gravior leto!—Piger ignavos

It must be evident to medical readers, how little this eruptive disease coincides in symptoms with the *Pestilence*, and how nearly it agrees with the Small-pox or Measles:—I do not think the circumstances attending these eruptions, are better described by any of the Arabians or other medical writers prior to Rhazes, in the tenth century.

Having formerly concluded the pestilential disease in Syria (of which an account was quoted from Eusebius, page 6) must have been the Small-pox, I think it not amiss to observe, that Ruffinus, his immediate translator, in order to make the description intelligible to Roman readers, says, "the bodies of men were covered with the worst of ulcerations, known by the name of *Ignis Sacer*,

Alligat artus languor, et ægro
Rubor in vultu, *maculæque* caput
Sparsere leves; tum vapor ipsam
Corporis arcem flammeus urit
Multoque genas sanguine tendit,
Oculique rigent, et *sacer Ignis*
Pascitur artus. Resonant aures
Stillatque niger naris aduncæ
Cruor, et venas rumpit hiantes.
Intima creber viscera quassat
Gemitus stridens, &c. &c.

Senec. Œdip. Act. I.

and with those which are called *Carbuncles*, so that even the mouth and the eyes did not escape *."

Constantinus Africanus, after Haly f. Abbas, describes the particular form of Small-pox, which had been denominated *Ignis Sacer*, or *Persian fire*. It coincides with the Phlyctænæ or Pemphigoid Fevers mentioned by Hippocrates and Galen (pp. 47, 53). According to Haly, "Livid vesicles, with an irregular base, and confluent, resembling the effects of a burn, and intermixed with puffy tumors, are called *Persian fire*, and constitute the *worst kind* of Small-pox †."

Constantine's specification of this variety of the disease, is in the following terms: "In initio pustulæ sunt liquidæ (watery), medio punctum nigrum habentes, cumque augmen-

* The whole passage is as follows: "Aeris quoque temperies in tantam corruptionem versa est, ut humana corpora ulceribus pessimis, quæ *Ignis sacer* appellantur, necnon et his, qui dicuntur *Carbunculi*, *replerentur*, ità ut ora hominum atque oculos occuparent, et ut siquis forte ex his effugisset mortem, luminibus orbaretur.—Sed et aliis nihilominùs pestilentibus morbis, virorum ac mulierum immensæ multitudines, et præcipuè infantum acervatim cadebant."—Euseb. Hist. Eccles. l. ix. cap. viii.—Ruffino interprete.

† Theorice, lib. viii. cap. 14.

tentur—dilatantur et altera alteri conjungitur, neque rotundantur, sed earum forma in lateribus diversatur.—His si admisceatur sanguis cum putredine acutâ, fit vesica sicut igni accensa, et vocatur Ignis sacer, quod pessimum est *."

The resemblance of the corrosive vesications, in the scorbutic Arsura, to the confluent Small-pox, led the Romans to apply the *same* denominations to them, especially as both diseases were thought pestilential.

Rhazes † and Avicenna give the name *Persian* or *sacred fire* (Nar al-Parsi) to the species of Anthrax described by Galen as vesicular (see page 48, note); and observes that it occurred in pestilential seasons ‡.—When Rhazes translates Galen's observations

* Commun. Loc. Med. viii. 14.

† Lib. xxii. c. 7.

‡ Avicenna, tom. ii. p. 114. L. iv. F. iv. Tr. i. c. 9. He observes that the *Anthrax* (Jemret) and *Persian Fire* (Nar al-Parsi), are species so nearly allied, that it is of little importance which of the two words should be employed as the generic term. The Persian Fire, which partakes of the nature of Herpes, is, he says, accompanied by violent, malignant, and fatal Fever, and occurs in pestilential seasons. The Anthrax, he thinks, has more affinity with Phlegmon, but is also pestilential.

on the " epidemic Anthrakes in Asia*," he again employs the same term (Nar al-Parsi). We may therefore conclude that the Small-pox also was, at an early period, denominated *Persian Fire* by the Syrians and Arabians.

* See above page 49, and note, page 48.

CHAPTER IV.

Small-pox prevalent in Britain and Ireland, and on the Continent of Europe, prior to the supposed Origin of the Disease in Arabia.

About the year 550 of our Æra, the French and Italians gave to the actual Pestilence a specific denomination—Pestis inguinaria, or Pestis glandularia. Historians and other writers presently adopted this distinctive title*, which brought into notice other spe-

* Paulus Diacon. De Gest. Langobardor. Lib. ii. cap. 4.—iii. 23. and iv. 4.

Paul Warneford, on the same subject, calls it Pestis bubonum.—Compare Aimon Monachus, De Gestis Francor. et Gregor. Turonens. Hist. Franc. lib. x. 1. &c.

Paulus Diaconus thus describes the Ligurian Pestilence in the time of Narses, A. D. 566. Cœperunt nasci in inguinibus hominum, vel in aliis delicatioribus locis, glandulæ, in modum nucis seu dactyli, quas mox sequebatur febrium intolerabilis æstus, ità ut in triduo homo extingueretur: Sin verò aliquis triduum transegisset, habebat spem vivendi. Erat autem ubique luctus, ubique lachrymæ, &c. &c.—He concludes with the following passages, which are in his best stile:——" Nulla vox in rure, nullus pastorum sibilus, nullæ insidiæ bestiarum in pecudibus, nulla damna in do-

cific forms of contagious disease, and finally led to the discrimination of the Lues Venerea*, or chronic Pestis inguinaria.

Fifty or sixty years before the supposed commencement of the Small-pox in Arabia, (page 1,) we find the disease making great devastation, from time to time, in France, Italy, Germany, and Switzerland, where it was called by literary men, Pusula or Pusulæ, Pustularum morbus, and morbus Dysentericus cum pustulis.

Gregory, Bishop of Tours, in his history of the Franks, has given the following particulars respecting it:

"In the 5th year of King Childebert (i. e. A. D. 580), great floods, tempests, hail, earthquakes, and several prodigies, were succeeded by a dreadful Plague (Lues); for almost every district of France was occupied by a dysen-

minos volucribus.—Sata transgressa metendi tempus, intacta expectabant messorem: vinea amissis foliis, radiantibus uvis, illæsa manebat. Nulla erant vestigia commeantium; nullus cernebatur percussor, et tamen visum oculorum superabant cadavera mortuorum. Pastoralia loca versa fuerunt in sepulturam hominum, et habitacula humana facta fuerunt confugia bestiarum." Lib. ii. cap. iv.

* Dr. Willan was engaged, at the time of his death, in collecting materials for a history of the Lues Venerea, of the existence of which in antient times he was inclined to think that the records of medicine furnish satisfactory evidence.—A. S.

teric disease, in which the patients were affected with violent vomiting, fever, head-ach, and excruciating pain in the loins: what they discharged from the mouth was green or yellowish. Many persons asserted this was the effect of some hidden poison. Rustics called it the *Cleansing-pox**, under an idea not destitute of probability, because, when cupping glasses were applied to the legs, or between the shoulders, during the progress and eruption of the vesicles, many patients were freed from disorder by the discharge of sanies†. Further, the herbs, which are taken as anti-

* *Corales* pusulas, i.e. Pustulas depurantes, or Pustulas secretorias, from the old Franci-Teutonic word KORA, signifying "to select," "to separate," or "to strain off." In another dialect the word is KÜREN, from which originate the Latin words *cerno*, *secerno*, *discerno*,—*cernon* (a cullender), and cerniculum (a sieve). Hence also is our English word *churn*, or, as it is expressed in some of the northern dialects, *kern*.

† According to antient hypotheses, a morbid or putrescent humor, gradually separated from the blood and deposited on the surface of the body, formed the exanthemata in Fevers. See the quotations from Herodotus and Galen, pp. 28, 38.

Cupping and scarifying are recommended by Galen, after Herodotus and Antyllus, as likely to draw to the surface any acrid matter or virus acting on the inward parts, and to arrest the operation of poisons (φθαροποιὰς δύναμεις).—Gal. De Cucurbitulis.—Actuar. Med. l. iii. cap. iv.—Alpin. De Med. Ægyp. pp. 164, 195.

dotes to poison, proved salutary in a number of cases."—This epidemic was particularly fatal to infants and children*.—King Chilperic recovered with difficulty, but he lost his two sons†. Austrigilda, Queen of Orleans, sank under this disease. She retained to the last the ferocious and vindictive spirit of the times, having exacted a promise from the King (Gunthran) that her two physicians should be put to death if they did not save her. Soon after she expired, both of them were stabbed by the king's order‡.

The Count D'Angoûlème also died of this disease. The corpse appeared black and burnt, as if it had been laid upon a coal fire §.

In the 7th year of King Childebert (A. D. 582), Gregory mentions the appearance of a comet, and two remarkable meteors,—also, thunder, lightning, and blood-rain. "Hence," he says, "there occurred in that year an epidemic Lues. The sicknesses were various, some being of the miliary kind, others with

* Parvulos, adolescentes arripuit, letoque subegit: perdidimus dulces et charos nobis infantulos, &c. &c.

† Chodobert, the elder son, died in the church of St. Medard, at Soissons:—mediâ nocte anhelus, et tenuis spiritu exhalavit.

‡ Gladio feriri præcepit.

§ Gregor. Turonens. Hist. Francor. lib. v. cap. 35-37.

vesicles and pusulæ, and they destroyed great numbers of the people. Several, however, by taking proper care, escaped death." "But we have heard," he adds, "the Morbus inguinarius raged this year at Narbonne so dreadfully, that death was separated from the seizure only by a very short interval." Lib. vi.

The Dysenteric pustular disease is said, at other times, to have been diffused through different parts of France and Germany, with great mortality*. Though called *dysenteric*, from the vomiting and pain in the bowels, usually attending it†, this disorder had not any affinity with the bloody-flux, a complaint from which Gregory himself had suffered much, and which he has described in proper terms‡.

* See Greg. Turon. lib. ix. 13. lib. x. c. 29. and Mirac. S^ti Martini, lib. ii. cap. 52. where he says, "Cum morbus ille *dysentericus cum occultis pustulis multas attereret* civitates, ac, inter reliqua loca, urbs Turonica graviùs laboraret, multi abraso a beato tumulo pulvere hausto sanabantur;" &c. &c.

† Febris, anxietas, acutissimus dolor in regione lumborum, ægritudo, atque vomituritio immanis, signa sunt, quibus, ante eruptionem Variolæ confluentes se produnt. Sydenham, Op. p. 98. Compare note, p. 42.

‡ Mirac. S^ti Mart. iii. 52. De Clerico Dysenterico. "Unus nostrorum ventris fluxum incurrit cum febre, et nimiam defectionem stomachi, et quæ projiciebat per infe-

If any one should still hesitate to apply the passages above-quoted to the Small-pox, his doubts must, I think, be removed, on a perusal of the subsequent narrative, in which the vesicular or pustular Lues is described without the epithet *Dysentericus**.

"Last year, the state of Tours was *desolated* by a severe pestilential sickness (Lue Valetudinariâ);—such was the nature of the infirmity (*languor*), that a person, after being seized with a violent fever, was covered all over with vesicles and small pustules (vesicis ac minutis pustulis). The vesicles were white, hard, unyielding, and very painful. If the patient survived to their maturation, they

riorem partem pars maxima cruor erat; et ea eum magis affecerat, quia cibum quem accipiebat, invalescente nauseâ, statim rejiciebat."

* The prefix to the statement is, De Lue quæ cum vesicis fuit. Mirac. Dom. S^ti^ Martini, l. iii. c. 34.

The circumstances to which Gregory here refers, took place soon after his appointment to the bishoprick of Tours, in the year 573: he died A. D. 596.

His statement is here decisive respecting the existence of Small-pox in the centre of France long before the Arabian Æra (page 1). It would be a frivolous attempt, to arrange under Impetigo, Herpes, Erysipelas, or Scabies, cases of an acute, contagious, pestilential, and most fatal disease:—Lues populum gravissimè vastans—multas civitates atterens—Lues gravissima, febre exurens, &c. &c.

broke, and began to discharge, when the pain was greatly increased by the adhesion of the clothes to the body.—In this malady, the medical art did not avail without the assistance of Saint Martin; for many were restored, who sought a benediction from his holy temple. Among others, the Lady of Count Eborin, while labouring under this pest, was so covered with the vesicles, that neither her hands, nor feet, nor any part of the body, remained exempt, for even her eyes were wholly closed up by them. When nearly at the point of death, she received some of the water, in which the tomb of the blessed saint had been washed at the Lord's Passover.—This having been taken as a drink, and applied to her sores, the fever abated, the discharge from the vesicles was made without pain, and she was soon after healed."

In another place, Gregory informs us, the most dangerous period of the pusulæ is the time of scabbing, or incrassation of the virus*.

Felix, Bishop of Nantz, (he says), was vio-

* Quanti a pusulis, veneno incrassante, præmortui. De Gloriâ Confessorum, cap. 24.

So Avicenna, lib. IV. ii. Tr. i. cap. 98. Et multoties moritur aliquis in Variolis in declinatione, &c.

lently affected with this distemper at the age of 70. When the fever abated, and the pocks (pusulæ) came out on the lower extremities, he applied, with the usual intention of abstracting the venomous humour from his body, a cataplasm of Cantharides *, which being made too strong, produced mortification, and was the cause of his death †.

Gregory, in some passages, employs the terms Pustulæ, or pustulæ malæ, instead of dysenteric or vesicular Lues; and he informs us, that the persons affected were not always conveyed into churches, to be cured at the tombs of departed saints, but occasionally repaired to holy men and hermits, who by prayers and intercession, and by making the sign of the cross, removed the disease, or subdued its virulence ‡.

* This application was frequently made in pestilential or malignant Fevers. Thus in Vita St. Columbæ (20 Maii, page 348), Priorissa supra cavillam pedis alligavit cauterium cataplasmatis,—ruptorium dicunt.

† Hist. Francor. lib. vi. cap. 15.

‡ In speaking of Eparchius (afterwards called St. Cibar), a devout and benevolent recluse, near Angoulème, he says, *Pusularum malarum* venenum, crucis signo, sæpe compressit.—Lib. vi. cap. 8.

So the Hermit Patroclus, (lib. v.), " Frigoriticis (af-

In the three following centuries, not many French writers adopted the Italian word Variola: they continued to employ the terms Pusulæ and Pustulæ, or the corrupted words Pesulæ, Pestullæ, Forstullæ*, and Pustellæ†.

Fredegarius, who, in the time of King Pepin, wrote an abridged history of the French, still applies the title Morbus Dysentericus to the dreadful pest which desolated France and Germany in the sixth century.

The Dysenteriæ Morbus, inflicted, according to Aimon Monachus, on the invading Normans, after they had violated the Oratory of St. Germanus, at Paris, A. D. 846, was not the Dysentery in the received sense of the term, but coincided in circumstances with the pestilential disease described by Bishop Gregory. The offenders perished daily in great numbers, and many were smitten with

fected with agues) *Pustulis* laborantibus, vel reliquis morbis, sæpe per orationem remedia conferebat."

The Small-pox was occasionally termed Pustularum morbus (or Infirmitas, or Pestis) to the end of the fourteenth century: Vita S^ti^ Galter. 8 April, Tom. i.: Vita S^tæ^ Brigittæ, ibid. and Vita S^ti^ Felicis, page 839.

* Glossar. Latin. Græc. Ducange.

† Thus, in the epistle quoted by Ducange, and written in the name of J. C. about the time of Charlemagne: Mittam in eis *Pustellas*, accessiones, et omne genus infirmitates.

blindness. In stating the case of Kobbo, the King's lieutenant, Aimon informs us his whole body became turgid, so that neither a feature nor any organ of sense was discernible, and his abdomen distended even to bursting*. Many others (he says) were affected in a similar manner, till the king, fearing the *contagion* would reach himself and his nobles, determined to stop, by a bold manœuvre, the further progress of the disorder†.

Marius, Bishop of Avenche, a cotemporary with the Bishop of Tours, denominates the eruption in the epidemic Lues described by the latter,—Variola,—for we must suppose that the Morbus Dysentericus cum pustulis, was the same as the Profluvium ventris cum Variolâ, in the following passage of Mario's

* Rhazes says, "Quando cæperint Variolæ, ad invicem connexæ, confluere et dilatari, et molestia vehemens sit, et venter inflatus tumescat, huic ægroto mors propinqua est. Cap. 14.

† Practitioners may wish to inquire under what mode of philosophizing the Norman monarch formed his plan of security. The philosophy of a Barbarian Despot does not extend far beyond the operations of the sword. On this occasion, the king cut off the heads of all his followers who had received the infection, or who had been exposed to it, and suddenly decamped with the rest.—See Acta S^ti^ Germani, May, Tom. vi.

Chronicle: "This year (i.e. A. D. 569-570) a violent Fever, with *flux of the bowels*, and *Variola*, afflicted both Italy and France." "There was also a great mortality among horned cattle*."

At the British Museum there is a miscellaneous MS. of the eighth or ninth century, partly Saxon, partly Latin, in which it is said that St. Nicaise, Bishop of Rheims, and a martyr, A. D. 453, had been affected with a species of *Variola*, and was at the same time favoured with the privilege of emancipating his worshippers from the disease, by means of a talismanic inscription, to be suspended about their persons, as then usual: "Sanctus Nicasius habuit *minutam Variolam*, et rogavit Dominum ut quicumque nomen suum secum portaret scriptum, - - - - - - - - - Sancte Ni-

* This author terms the Pestilence which occurred the following year, "infanda infirmitas, atque glandula, cujus nomen Pustula.—So Fredegarius (Chron.) applies to the plague at Marseilles, &c. &c. the title of clades glandulæ, or clades glandularia.—In confounding the names *Glandula*, and *Pustula* or *Pusula*, denoting Pestilence and Small-pox, Marius adopted the general opinion respecting the similarity of the two diseases,—at least he shews us the unsettled state of nomenclature at that time.

casi, præsul et martyr egregie, ora pro me peccatore, et ab hoc morbo, tuâ intercessione, defende. Amen."

The dread of this fatal distemper was attended with a proportionate degree of superstition, in consequence of which the Franks, Lombards, Goths, Burgundians, and Saxons*, lately converted, and not fully acquainted with the Christian tenets, resorted, for defence against contagion, to their antient usages†, or intermingled orthodox forms of prayer with a variety of exorcisms, and incantations, or cabalistic invocations.—These are mentioned by the Bishop of Tours, and by other writers‡, and some of the forms are

* A. D. 685. Vita S^ti Cuthbert.

† Bede says, "When the East Saxons were affected with a pestilential Lues (A. D. 666), they forsook the Christian sacraments, et cœperunt fana derelicta restaurare, et adorare simulacra, quasi per hæc possent a mortalitate defendi." Lib. iii. cap. ult.

‡ Gregor. Turon. Hist. Francor. iv. 19. Jejunia, preces, eleemosynæ factæ sunt, &c.—He also says, Noctu cum cereis supplicatum est tempore Pestis, in Remensi Templo, item urbem cantilenis circumeunt. De Gloria Confessorum, cap. 79.

This was an antient mode of lustration (Macrob. Saturnal. lib. i.) but adopted, like many others, by the Catholic Chris-

preserved at the British Museum in the MS. above quoted*; and in another of equal antiquity.

The following extracts from a rhythmical but rugged Canta §, afford a specimen of the precautions used when the Small-pox was epidemic:

tians. Sigebert. Chron. 542. and Baronii Martyrolog. 2. Febr.

Pope Gregory II. A. D. 733, ordered Bishop Boniface to prevent the admixture of Pagan with Christian ceremonies in Germany, and to wean the Germans from eating horse flesh.

Pope Gregory III. wishing to check the fear of contagious diseases among the Christian functionaries, subjoins the following orders: "Let the sacrament be administered to such lepers as are faithful: and if any pestilential or fatal disease (Pestifer morbus aut mortalitas irrepserit) spread into churches or monasteries, let those who are not immediately affected abide in their places, for who can escape out of the hands of God?" Nancleri. Chronogr. page 787.

* To the exorcism or charm in the name of St. Nicaise quoted above, are prefixed the Saxon words þiꝺ, Poccas, i. e. "against the Pocks." It is preceded by another against pestilential Fever, in the antient style, but with the sign of the cross prefixed: þiꝺ ðe ðnıꝑ † In nomine Domini nostri J. C. tera, tera, tera, testis contera, taberna, gite, ges, mande leis, bois, eis, andies, mandies, moab, lib, lebes: Dominus Deus adjutor sit illi. itt, eax filiax, artifex.—Amen. —Cotton MSS. Caligula, A. xv. fol. 125.

§ Harleian MSS. No. 585.

" In nomine Patris, et Filii, et Spiritus Sancti. Amen†.
" In adjutorium sit Salvator†.

Domino Cœli, Regi Regum,
Nos debemus reddere
Gratiarum actionem,
Atque de se petere,
Ut a nobis Lues ista
Hujus Pestis currat,
Et in nobis quam donavit
Salus vera maneat.
. . . . . .
Jesu Christe, viti alta
Subveni auxilio,
Et salutis tuæ Peltâ
Defende,—præsidio
Summo et digno, te obsecro,
Intende [ ] arcana
Mei cordis, atque peto
Angelorum millia,
Ut me salvent, ac defendant
Doloris igniculo;
Et potestate Variolæ
[Liberent], ac protegant
Mortis a periculo.
. . . . . .
Ne dimittas nos intrare
In hanc Pestilentiam,
Sed salvare nos dignare
Per tuam potentiam.

What remains of the Latin does not appear to be metrical:

- - - - Libera illam, Domine, de *languoribus pessimis* et

de periculis hujus anni, quia tu es Salvator omnium, Christe, qui regnas in sæcula: fiat sanitas Domini super me†*. Amen."

The author then concludes in Saxon, by invoking St. Romwald, St. Cassianus, St. Germanus, and St. Sigismund the king, to defend him against the *loathed pocks*, and against all evil:

(gescyldath me with tha lathan Poccas & wid ealle yfelu. Amen.)

M. Du Fresne§ has noted the frequent recurrence, in the Acta Sanctorum, of the terms Variola‖, Vayrola, Veyrola, Vayrora,

* After these words follow,

Brigitarum ancillarum tuarum malint———ne dearnanda, murde murrumce domur brio rubebront.

This is probably a charm, like that quoted above, and unintelligible.

§ [Glossarium ad scriptores mediæ et infimæ Latinitatis, Tom. vi. col. 1418. Parisiis, 1736.]

‡ Respecting the etymology of this word, which has given rise to much discussion, Dr. Mason Good states, that it is "derived either from the old Spanish *vario*, (Lat. varus,) 'a pock or pimple,' or from the Spanish diminutive *viruélas*, importing Small-pox at the present moment, and evidently derived from the Latin *virus*, first latinized into *virúola*, and afterwards changed or corrupted to *varióla*; in Italian

Variolus, and Morbus Varicus*, between the years 800 and 1400.—Among the miracles exhibited, A. D. 864, at the tomb of St. Ludger, in Westphalia, the following is recorded in the Fulda MSS. †:

vajuolo, in which the *u* is retained; as though *virus* was the radix." Vide System of Nosology, pp. 206-207, note: and Essay on Medical Technology, in Transactions of the Medical Society, Vol. I. Part I. p. 15.—Dr. Thompson (physician to Frederick, Prince of Wales) appears to have previously assigned an origin to the word Variola similar to the first of those above mentioned; at the same time deriving the term *varus* from a Hebrew root.—Inquiry into the Origin, Nature, and Cure of Small-pox, page 10, 1752.—A. S.

* The Variolous disease is not, in these books, distinguished from the Measles. Every volume contains numerous instances of blindness occasioned by the Small-pox, and of miraculous cures. St. Franca of Placentia, and St. Yvon of Brettany, restored to sight persons in whom the albuginous excrescences (page 11) on the cornea were not less than peas. A boy, who had totally lost his sight for ten years by the Small-pox (morbus quem dicunt Varicum), was instantly cured on praying before the body of St. Maurin, found at Cologne, A. D. 966. June 10. Tom. ii. page 282.

† This saint was born in East Friesland about the year 744, when the natives were induced to adopt Christianity; a mission of priests having been conducted thither by Wilfrid, Bishop of York, whose endeavours were promoted by the Emperor Charlemagne.

Ludger studied, A. D. 763-4, in England, which country, says the author of his life, afforded the best soil for religious culture. Being driven from his native place with

" A man of the village of Bramseli, named Rodbrand, was sick unto death by an infirmity, which they call Variola, and had struggled nine days under it without hope of recovery. His whole body, covered with ulcerations, or turgid vesicles, had a dreadful appearance," &c. &c. He was then carried out to the high-road*, and with his feet directed towards St. Ludger's monastery, he pledged himself by a solemn vow to make a pilgrimage thither, with offerings, in case of his recovery. On this, he became convalescent, and all around were astonished when they saw the man, whose visage, from the number of pustules and great inflation of the features, was scarcely human, restored almost instantaneously to his pristine state and appearance †.

many other pious christians, by Duke Wittikund and a Saxon army, he spent three years at Rome and Monte Cassino.—After his return, A. D. 787, he assisted in converting the Saxons, and persuaded even the ferocious Wittikund to bend to the cross. He was constituted Bishop of Mimigarde-ford, A. D. 801, and died in 809.

* The above narrative cannot fail to remind the medical reader of the remarkable case of Small-pox related by Sydenham (Opera, p. 121), in which the patient, supposed to be dead and laid out as a corpse upon a table, was resuscitated by the free admission of cold air, and ultimately recovered.—A. S.

† Bolland. Acta Sanctorum, March 26. page 658.

Dr. Woodville refers to an English Chronology, which I have not been able to procure, but which states, that the Princess Elfrida, daughter of Edward the Elder, was affected with the Small-pox, in the year 907*.

A. D. 938, Walter, a child of Rodolph, governor of St. Omer's, was greatly endangered by the Small-pox (Variola), but soon recovered, his father having presented him, with supplications, before the altar of St. Bertin, and made a vow to dedicate him, after recovery, wholly to the service of the saint, at the adjoining monastery of Sithin†.

In January 962, according to old French Chronicles, Baldwin, Prince of Flanders, died of the Small-pox, at an early period of life‡.

Baron Dimsdale has been countenanced

* History of Inoculation, page 29.

† St. Bertin was born near Constance, A. D. 608 or 9, but from the year 648 resided in Flanders: he was made Abbot of Sithin 656, and died there in 709.

The accounts of the miracles performed by this saint as well as those of St. Ludger, and many others about this period, were written by German divines.

‡ Baudouïn, le jeune prince de Flandres, fidèle à Lothaire, mourût le premier jour de Janvier, de la maladie, que l'on appelle La petite Vérolle, volontiers plus dangereuse aux hommes qu'aux petits Enfans. Fanches, Antiq. Francor. Lib. xii. c. 15.

by high authorities, in saying, "It is allowed that the Small-pox was imported from Asia at the time of the Crusades, and made its first appearance in Europe about the thirteenth century. Soon after which, innumerable writers describe the distemper*."

The Baron's position is entirely superseded by the foregoing quotations; from which it appears that the Small-pox prevailed, and was known even under its name Variola, in every part of Europe, during the ninth and tenth centuries,—whereas the first Crusade was not terminated till the year 1100†.

Historians, who describe the ravages of this disorder,—ravages deemed only controulable by the powerful intercession of saints,—do not speak of it as new or singular; neither has any one questioned the authenticity of the tradition‡, which states that St. Nicaise was af-

* See the History of Inoculation by Dr. Woodville, who has argued against the Baron's assertion, though he maintains that "the *original commencement* of the Small-pox in Arabia was A. D. 569."

† Dr. Freind, after suggesting the probability that the Arabians received the Small-pox "originally from the more distant regions of the East," says, but without mentioning his authority for the fact, that the infection was carried by the Saracens with their conquests, into Spain, "in the very beginning of the *eighth* century." History of Physic, Vol. II. p. 190.—A. S.

‡ See above, page 96.

fected with the Small-pox about the year 452, and was empowered to transfer a privilege respecting it, to sincere votaries after his death.

In ascending to a more remote antiquity, we do not find the period when this virulent disease was first introduced into Britain. Every part of the Roman empire was desolated by frequent Pestilentiæ, consisting, as was formerly stated, of the putrid Scurvy, and eruptive contagious Fevers, much more than of the bubonic Pestilence. Spain, Gaul, and Britain, during the reign of the Cæsars, partook largely of such calamities; but the sufferings in distant provinces were heard, by the indolent, degenerate Romans, with frigid indifference; and the complaints transmitted to government, merely afforded subjects of mirth at the Emperor's table.

Since no grievances were redressed, and no attention was given to the distresses of the people beyond the mountains, we should vainly search for any account or nice discrimination of the diseases prevalent among them, in the first 300 years of our æra.

After the departure of the Romans from Britain, the *Pestilentia*, mentioned in history, was that connected with dearth, originating from the repeated ravages of the Pichts and Scots, who carried off, or destroyed the pro-

duce of the land *. This distemper could not be the same as the destructive Lues †, said to occur after the cessation of hostile inroads from the North, and in a time of universal abundance ‡.

The conquering Saxons were in like manner affected with Pestilentiæ of different characters §. In the years 664, 670, 678, and 680 to 685, the new settlers perished in great numbers through the Ignis sacer ||, consequent on famine.

Their chiefs being constantly engaged in warfare, neither encouraged commerce nor

* Cædunt omnia et quæque obvia——maturam segetem metunt, calcant, transeunt. See Gildas, cap. 13.

† It is called *pestifera Lues*, by Gildas, cap. 20. Acerba Lues, by Bede, l. i. cap. 14.

‡ Cessante vastatione, tantis abundantiarum copiis (A.D. 446.)—copiis Insula affluebat ut nulla tales retrò ætas meminisset,—cum quibus omnimodis et Luxuria crescit.—Hist. Gildæ, cap. 10.

Gildas says, the effects of plenty and luxury were envy, cruelty, fornication, lying, drunkenness, and quarrelling. He adds, that the clergy and laity (gregem Dei pastoresque ejus) were in these respects equally culpable.

§ Edilwaldi anno 2do magna tribulatio mortalitatis venit et duobus ferè annis permansit populantibus duris (v. diris) ac diversis ægritudinibus, maximè Dysenteriæ languore. Bede, lib. v. ad finem.

‖ It is called Pestis, Pestilentiæ Lues, mortalitas, &c. by Bede, and Matthew of Westminster, and in Lib. Roff.

agriculture; hence, whenever a crop failed, the people were left without resource, and suffered every extremity. Those who resided near the coast had not address or skill enough to obtain the food, with which the sea and the rivers would have abundantly supplied them.

When Wilfrid, ex-bishop of York, began to evangelize the South Saxons, after a drought and dearth of three years, he preached in vain to a starving audience; but when he had taught them how to fish dexterously*, and thus to support their families, in a scarcity of meat and grain, he gained their confidence, and they all immediately became Christians. King Ædilwalch, much pleased with the bishop's zeal and ingenuity, allowed him to found a monastery in Selsey, and gave him entire possession of that peninsula and of the eighty-seven families which occupied it†: to this donation he soon afterwards added the Isle of Wight‡.

* Before this time they had only been able to catch a few eels by means of ill-constructed nets.—Bede, Hist. Eccles. cap. iv. lib. iv.

† Omnes facultates cum agris, et hominibus, et inter hos, servos et ancillas 250.—Bede iv. 14.

‡ This Island contained 1200 families. The individuals of them being, according to the tenures in those times, at

The Kentish and Eastern Saxons were converted to Christianity under a mission conducted by St. Augustin, and composed of Italian monks, aided by French presbyters. From the year 597 *, the progress of conversion led to such frequent intercourse with Italy, France, and Belgium †, that the epidemical and contagious disease, prevailing on the continent at the close of the sixth century, (as stated above, page 87,) must necessarily be communicated from time to time through the Heptarchy.

After the establishment of religious houses in different districts, we accordingly find repeated mention made of a pestilential or contagious disorder, which spread from monas-

Wilfrid's own disposal, were all baptized in one day; for serfs necessarily adopted without much examination the creed of their masters.

* On Christmas Day, this year, 10,000 converts were baptized.

† Pope Gregory I. commissioned the Abbot Mellitus, and Lawrence, a presbyter, with several monks of St. Andrew, to compleat in Britain what St. Austin had begun. He therefore wrote letters to the Bishop of Arles, also to other bishops and potentates in their route, desiring them to assist his missionaries, and to send with them some presbyters from the districts nearest to Britain. Recommendations were sent to Theodoric, King of Burgundy, Theodebert, king of Austrasia, Queen Brunchild, and King Clothaire, son of Chilperic.—See above, page 89.

tery to monastery, and to the neighbouring inhabitants.

Boisil, [prior of the Abbey of Melrose *,] died of this disorder† in 661, and communicated it to his pupil St. Cuthbert, who escaped with life, but suffered much after the crisis, from internal pain, and from a tumour near the knee.

A few years afterwards ‡, St. Cedda, Bishop of the East Saxons, being on a visitation to the monastery of Lestingham, was infected with a contagious distemper, and died on the seventh day. Thirty monks, who came to visit the tomb of their bishop, were likewise infected, and most of them died §.

The contagious Lues, or Pestilentia, began among the men at Barking monastery in the

* 'Præpositus de Mailros.'—Vide Bedæ Hist. Eccles. lib. iv. c. xxvii. p. 175.—A. S.

† Boisil predicted his own death three years before, and informed Abbot Eatun, that *he* would not die of the same Pestilentia, but of the disease called by physicians the Dysentery.—Bede, Vita Cuthberti, cap. viii.

Bede usually expresses, by this term, the ulcerative Dysentery, and defines it, "Longus interaneorum dolor et ardor," and "Profluvium or Fluxus ventris." So in Vita Cuthb. cap. 35: "Aspiciens fratrem longâ cui clade privata, tabida marcebant, exhausto viscere, membra.

‡ About the year 672.

§ Vita S^ti Ceddæ, vii Jan. page 375.—Compare Bede, iv. 3.

year 676. A boy, three years of age, conveyed the infection to the women's side, and many died both of males and females. St. Ædilthryda, Abbess of Ely monastery, died of this disease A.D. 679*.

The inmates of Bishop Wilfrid's monastery in Selsey, were affected with a similar disorder A.D. 685. It proved fatal to many of those who had attended the Bishop on his first settlement, as well as to a Saxon boy, and some other converts †. In the course of the same year, the disease re-appeared at Landisfarne (Holy-Island), St. Cuthbert's Abbacy, and in 686 spread through the adjoining district, where it particularly affected children ‡.

This disorder frequently occurred in Ireland, during the sixth and seventh centuries, from the mode of communication above specified. Many English nobles, as well as private men, resorted to that country, with the hope of enjoying retirement, and opportunities for study. Some became monks, others read divinity in the cells of approved teachers (magistri). Two of the nobles, Edelhun and Egbert, were severely affected in the

* Lib. iv. c. 19.

† Bede, l. iv. c. 14.

‡ Vita S^{ti} Cuthb. cap. 33.

monastery called Rathmelsigr. Adelhun died; but Egbert, after prayers and penance, recovered, and retired to a monastery in the Island Hy or Hii, since called Icolmkill *.

From a singular portion of history which has been preserved in the records of the church of Mayo, we find the Ignis sacer, or pestilence originating from famine †, contemporary with an infectious disorder likewise termed pestilential, but which equally affected the rich and the poor, as before observed among the Saxons, page 106.

According to the records, two kings of Erin summoned the principal clergy and laity to a council at Temora, in consequence of a general dearth, the land not being sufficient to support the increasing population ‡.

* i. e. Sancti Columbæ cella: erat autem Columba, primus doctor fidei Christianæ transmarinis Pictis ad Aquilonem et monasterii fundator, multis diu Scotorum et Pictorum populis venerabilis. Bede, lib. v. c. 11.

† It was called by some *Pestis flava*, Vita S^ti^ Fechin, 20 Jan. tom. 11.—by others, *Infirmitas icteritia*, or Budhe Connail. Vita S^ti^ Geraldi, 13 Mart. tom. 11. page 291.

‡ Lords at that time apportioned to each of their tenants, 7 acres of arable ground (terra planâ); 8 acres of rough or coarse ground (terra asperâ); or 9 acres of woodland (de Sylvâ).—In Vit. citat.

The chiefs (majores populi) decreed that a fast should be observed, both by clergy and laity, so that they might with one accord solicit God in prayer, to remove, by some species of pestilence, burthensome multitudes of the inferior people, and thus enable the residue to subsist more commodiously *.

St. Gerald and his associates suggested, that it would be more conformable to the divine nature, and not more difficult, to multiply the fruits of the earth, than to destroy its inhabitants. An amendment was accordingly moved, " to supplicate the Almighty not to reduce the number of the men till it answered the quantity of corn usually produced, but to increase the produce of the land, so that it might satisfy the wants of the people."

However the nobles and clergy, headed by St. Fechin, bore down the opposition, and called for a pestilence on the lower order of the people. According to the records, God's judgment immediately fell upon the authors of the wicked petition. The two kings who had summoned the convention,

* Omnes majores petebant ut nimia multitudo Vulgi per infirmitatem aliquam tolleretur, quia numerositas populi erat occasio famis.

with St. Fechin, the kings of Ulster and Munster, and a third of the nobles concerned, were cut off by the Budhe Connail *, or sallow pestilence, the destructive malady to which they would have devoted the people.

St. Gerald returning towards Corann, in Connaught, found the chief of a district and his children, besides several others, affected with a pestilential distemper. He put his cowl over them, and healed them all; but when arrived in Mayo, he learned that the distemper had been communicated to the inhabitants of the monasteries founded by himself. His sister, with nearly 100 of her society, and 50 of his own disciples, had died of it. The disorder thus spreading from monastery to monastery, must have been contagious. As affecting innocent people, in a remote district, it could not, in the author's view, be similar to the icteritious plague or sickness inflicted on the inhuman kings and nobles at Temora. Whenever a pestilentia, not connected with famine, is described by authors, we generally find it of the eruptive kind, like that described by Eusebius, Philo, Dionysius, Nicephorus, and Cedrenus.

* See above, page 111, note.

Adomnan, a learned Hibernian Scot, has favoured us with a minute account of such a pestilentia in Ireland, contemporary with the pustular Lues in France, mentioned by Gregory of Tours.—He says *, " St. Columba, sitting on Dunmor, a small hill in Iona, saw to the northward a thick cloud ascend from the sea, when he said to Silvanus, a monk near him, ' This cloud will prove highly noxious both to men and cattle: In passing with velocity, over a considerable part of Scotia †, it will discharge, at evening, a morbiferous rain, which will cause severe purulent ulcerations to arise on human bodies, and on the udders of cattle, so that men and beasts, equally oppressed by the virulent malady (illâ venenosâ gravitudine), shall narrowly escape with life: but let us have compassion, and by divine assistance, relieve their sufferings.'— The attending monk was then directed to take some of the consecrated bread, and to set sail, the wind being favourable. Nevertheless, the cloud had outstripped him, and the Pestilence was begun. He cured the

* In Vita S^ti^ Columbæ, lib. xi. cap. 3.

† i. e. Ireland, for at that time the Scots occupied the northern parts of Erin.

first persons he saw in the disease, by sprinkling over them water in which had been dipped the consecrated bread. The rumour of these speedy cures being diffused through all parts of the country, ravaged by this pestiform distemper (Morbo Pestilentiore), drew the people round St. Columba's envoy.—He sprinkled all with the holy water, and soon healed both men and cattle."

In this, as in other instances, we have not to criticize the narrative, but we must infer from it, that St. Columba and Adomnan, were acquainted with a pestilential malady, in which, the surface of the body exhibited a pustular eruption, and that this took place in Britain and Ireland, before the Arabian Æra of the Small-pox.

Since this sheet has been printed, the editor has seen the Chronological Table referred to by Dr. Woodville in his History of Inoculation, and which Dr. Willan states his inability to procure (page 102). It occurs in the 2nd volume of a General Chronological History of the Air, Weather, Seasons, Meteors, &c. by Dr. Thomas Short; who is better known to the public as the author of a Treatise on Mineral Waters. The following is the passage alluded to: 'A. D. 907. Princess Elfreda sick of the Small-pox, but recovered.' No authority is offered for this statement, and its value is farther diminished by the extraordinary credulity of the compiler.—A. S.

REPORTS

ON THE

DISEASES IN LONDON,

PARTICULARLY

DURING THE YEARS

1796, 1797, 1798, 1799, and 1800.

PREFACE.

A PART of the following Reports was inserted in the Monthly Magazine for the years 1796, 1797, and in the Medical and Physical Journal for 1799. Many of the readers of those periodical works having honoured with particular notice the statements respecting Chronic Diseases, as well as Epidemics, it was proposed to me that the monthly accounts of them should be revised, and republished separately, with any additional observations which might occur.

With this proposition I have complied, finding myself unable, through a variety of engagements, to accomplish another object which has been urged as a desirable one;—to give, under some proper arrangement, an accurate history of the disorders prevalent in or near London, from actual observation, without any bias from the consideration of diseases of other climates, and without a con-

stant reference to the congeries of symptoms detailed by systematic writers.

In the present work, not only the accounts of diseases for 1796, 1797, and 1799, are amplified, but Reports, entirely new, with various collateral observations, are added for the year 1798; also for 1800, a year remarkable for its temperature, and for an unusual series of complaints. Any irregularities* which appear in the lists of diseases will, I hope, be excused, a nice arrangement of them not having been the primary object. The generic distinctions and varieties must be principally referred to the nosology of Sauvages. In forming the three classes of Acute, Chronic, and Periodical Diseases, the usual plan of nosologists has not been observed. All the writers on this subject, influenced, perhaps, by the opinion of Sydenham†, have not only included Intermittents under the denomination of Fever, but considered one of their paroxysms as an epitome of Fevers in general, the different forms of which are said to consist merely of a repeti-

* The same generic titles are found sometimes among the Chronic, sometimes among Acute Diseases, according to the state of the symptoms.

† Sect. 1. cap. 1. &c.

tion of such paroxysms more or less distinctly marked, with longer or shorter intervals *. Those, however, who take the trouble to compare minutely the symptoms of an Ague, and of a malignant Fever from contagion, will find that the primary appearances, the course, and crisis, of the two diseases are as different as their exciting causes; and that no more analogy subsists between them than between the Small-pox, Erysipelas, Rheumatism, and internal Inflammation. I have, from close attention, been so much impressed with the difference, as to think that Intermittents should be wholly disjoined from every disorder propagated by infection, and arranged in a separate class. With respect to the classes under which the diseases are put down in the following pages, it may be observed, that,

1st, ACUTE DISEASES are attended with disturbance of the bodily functions, so violent and general, that, unless they terminate

* "From all this, a presumption arises that every Fever consists of repeated paroxysms, and differs from others only in the circumstances, and repetition of the paroxysms; and, therefore, that it was allowable in us to take the paroxysm of a pure Intermittent as an example and model of the whole."—Dr. Cullen's First Lines, cap. i. § 31.

favourably, or change their form, they must prove fatal within a short compass of time. The symptoms characterizing an acute disease at its commencement, and which have little remission during its course, are, sudden and considerable loss of strength, pain in the loins, aching of the limbs, total incapacity of attention or exertion of mind, heat of the skin, thirst, a frequent pulse, and furred tongue. These general symptoms, differently proportioned and variously modified, according to the strength, depression, or irregularity, of the pulse, the state of mind, and appearances of the tongue, form the subdivisions, and generic distinctions of febrile complaints.

2. Chronic Diseases are of long duration, and mostly consist of uneasiness in some part or organ, and of impediments to the performance of its functions. They are usually attended with general debility, but not with violent disorder of the constitution.

3. Periodical Diseases are characterized by a return, at stated intervals, of pain and general disorder, or fits of shivering, followed by heat of the skin, and perspiration, the whole being comprised in less than twenty-four hours. During the intervals, however, the patient is not in a state of

health, but has a sallow complexion and is affected with languor, debility, loss of appetite, &c.

Most of the plans of nosology are exceptionable, as being formed on hypothetical principles, rather than a strict analogy between the diseases put in the same order *. It is not my present view to multiply objections, nor to enlarge on this subject; I shall only observe that the disease, to which the denomination of Synochus is hereafter applied, has some affinity with the Synochus of the antients. This term is not employed by Dr. Cullen in its original sense, but to express the combination † of an inflammatory with a contagious Fever. The practitioners of North Britain hastily exclude from nosology, and seem to deny, the existence of a complaint ‡ (see page 148-9) with which their station does not lead them to be acquainted.

Erysipelas is usually ranked among the

* Thus Dr. Cullen has arranged as genera, under the order SPASMI, Diarrhœa, Diabetes, Tetanus, Epilepsy, Chorea, Palpitatio, Hooping Cough, Colic, and Hydrophobia.

† This often occurs incidentally; (see Account of Diseases from Dec. 1799 to March 1800;) but does not constitute an essential disease.

‡ See Cullen's First Lines, § 72.

Exanthemata, though having little affinity with the other diseases arranged under the same order. The form of it, entitled Erysipelas phlegmonodes (see page 158), does not seem communicable by contagion: however, when the fluid contained in its vesicles is inoculated into the arm, it excites a diffuse inflammation and swelling, with a slight degree of fever. The œdematic, or gangrenous forms of Erysipelas may be combined with malignant Fever, and thus communicated from one person to another. Instances of this have occurred frequently in Hospitals, the complicated disease spreading through a whole ward*. It is singular, that the Fever likewise unites itself with other complaints, and is propagated by infection under a double form. I may mention, as an instance, the combination of an ulcerated Sore-throat with malignant Fever. To this combination alone, which often occurs, and is very contagious, the title of Angina maligna would have been most properly applied. Medical writers, by not distinguishing it from the Scarlatina anginosa, have been led into obscurity, and made a foundation for some needless

* See Dr. Wells's Observations on Erysipelas, in the Transactions Medical and Chirurgical, Vol. II. page 213.

controversies. I may here also refer to the observations made in the Account of Diseases from September to December 1800, on the complication of puerperal and malignant Fever, which has some analogy with the cases above stated.

The term Hectica is used below in the signification given to it by the Greek physicians*; among whom it was not considered merely as a secondary complaint, depending on internal suppuration, or any local defect, but as arising from a failure of strength in old age, from an exhausted state of constitution, occasioned by fatigue, long fasting, anxiety, or loss of sleep; and sometimes as a sequel of Causos or other Fevers. They remark farther, that the Hectica often appears at first like an Ephemera, that it is always aggravated after food, that its duration is indefinite, and that it often terminates in a marasmus. All the species of Hectic are characterized by the recurrence every twenty-four hours, or sometimes every twelve hours,

* Galen. Meth. Med. 10.—De Marasmo, and De Diff. Puls. cap. 10.—Alexander Trallian, lib. xii. cap. 4.—Paulus Ægin. De Re Medica, lib. ii. cap. 32. Actuarius particularly distinguishes the secondary species of Hectic, connected with internal inflammation, suppuration, and scirrhus. Med. lib. ii. cap. 1.

of heat of the skin, after slight chilliness, with a circumscribed flush of the cheeks, an increased velocity of the pulse, and violent perspirations towards morning. In infancy, childhood, youth, and old age, (see page 143-4,) Hectic takes place, without any local affection, from changes in the constitution, connected with the different stages of human life. A similar state of disorder is often produced in persons of the middle age, when the constitutional vigour first appears to decline, not resisting as usual the operation of cold, fatigue, and other occasional causes. This state is mostly accompanied with aphthous ulcerations of the tongue and fauces, and a large secretion of frothy phlegm. Under this head also must be ranked the Febris aphthosa, or Hectica aphthosa, often put down in the succeeding lists. It commences with violent and repeated shiverings, succeeded by flushes of heat; with pains of the head, neck, and limbs; roughness of the throat; a dark redness and enlargement of the papillæ of the tongue; likewise an enlargement of the veins of the uvula, tonsils, &c. The formation of aphthæ is immediately followed by a dryness of the tongue, clamminess of the mouth, nausea, hiccough,

heat in the stomach, which is increased by medicines, wine, or food taken warm. A Diarrhœa supervenes, in which the stools are of a dark brown colour, and often streaked with blood. The urine is at first clear, but has afterwards a curdly pink sediment, as in other hectic cases. There is usually pain and deafness in one ear, with great pain and tenderness in the soles of the feet. A circumscribed redness appears on the cheeks towards evening, attended with a quick pulse, heat of the skin, slight delirium, and restlessness. During the day the patient is languid, and heavy, sometimes thirsty, with but little appetite. After the tongue, fauces, &c. have been healed, the Aphthous ulcerations return again, with internal heat, general uneasiness, and the same train of symptoms as at first. By frequent relapses of this kind, the patient is often reduced to an extreme degree of debility, and emaciation; and the whole duration of the complaint is from five to twelve weeks. The cases of Hectic, put down in the last report for the year 1800, were mostly of the kind here described. An account of this complaint was, by mistake, omitted in its proper place.

In the lists of diseases prefixed to the Reports, two-thirds of the cases occurred among the lower classes of people, mostly patients of the Public Dispensary, near Temple-Bar: the remaining third was the result of private practice in the upper ranks of society. The increased number of cases put down for the last two years must be in a great measure referred to the flourishing state of the Dispensary, by means of which the medical attendants became more fully acquainted with the diseases of the district; a district extending, from Smithfield and St. Paul's, to St. Martin's Lane and Tottenham-Court-Road.

A comparative view of the Bills of Mortality, at different periods, and a diary of the weather, are given at the end of the book, as necessary appendages to a work of this kind. The meteorological journal, taken from the Philosophical Transactions, was kept at the apartments of the Royal Society. It is to be noticed, that the quicksilver in the basin of the barometer is 81 feet above the level of low water spring-tides at Somerset-House.

REPORTS

ON THE

DISEASES IN LONDON.

STATE OF DISEASES IN LONDON,

On the 20th of March 1796.

DURING the winter of 1795-6, the wind being mostly in the west and south-west quarters, no frost took place till the latter end of February. But, notwithstanding the mild, warm, and often damp weather, so favourable, in general, to the production of putrid diseases, the number of infectious fevers, throughout London, was remarkably small. Intermittents, particularly Quartans and Quotidians, were, however, more frequent than usual, and very obstinate. The paroxysms, after having ceased for two or three weeks, recurred, in many instances, from exposure to cold: and a perfect cure was not accomplished till the middle of March.

The Scarlet Fever, with an ulcerated Sore-throat, had prevailed every autumn from the year 1785 to 1794, and proved extremely

fatal. This complaint began to decline in 1795; and is at present only sporadic. Since Christmas last, the Measles and Small-pox have been extensively diffused; the former disease being, for the most part, mild in its symptoms, and favourable in its terminations; the latter often confluent, and fatal, especially to children.

There was also among infants and children, during the month of January, an epidemic Catarrh, attended with a watery discharge from the eyes and nostrils, a frequent though slight cough, a shortness of breath, or rather, panting, a flushing of the cheeks, great languor, with disposition to sleep, and a quick, small, irregular pulse. These symptoms were alleviated by the use of emetics, blisters, and antimonials in small doses: and the complaint terminated in about eight days. It was succeeded, in February, by the Hooping-Cough, which commenced with a febrile stage, and proceeded with such severe paroxysms of the cough, that many delicate children sunk under them, being wholly exhausted by the violent and repeated exertions. In some cases, this disorder was instantly superseded by the appearance of the Small-pox, after the decline of which, the cough returned with the same

violence as at first. Three patients who seemed nearly spent by the frequent repetition of the paroxysms, the eyes becoming dull and glossy, the cheeks livid and bloated, the breathing laborious, the pulse weak and fluttering, were, nevertheless, recovered by the application of leeches to the chest, blisters, pediluvium, and very small doses of Dover's powder given every four hours.

Adults were, about the same time, affected with inflammatory Sore-throats, Coughs, and Catarrhal Fevers. In several patients, most of them females, a hard, sounding cough was, after some days, followed by an expectoration of thick, fetid, greenish matter, intermixed with a large quantity of clear, viscid mucus. Along with this, other symptoms appeared, which seemed to indicate the approach of Phthisis pulmonalis, as diarrhœa, hectic fever, night sweats, and emaciation. The complaint was much aggravated during the frost, which began in the last week of February, and terminated on the 11th of March. It was not at all alleviated by blood-letting employed at an early period of the cough. The most effectual remedies appeared to be, cupping between the shoulders, blisters applied to the sternum and scrobiculus

cordis, pediluvium, antimonials occasionally, nitre, and demulcent drinks. Under this treatment, added to a light cooling diet, all the above patients were restored to health before the 20th of March. The disorder had not therefore, in any case, produced ulcerations in the lungs: and the expectorated fluid, so alarming in its appearance, was perhaps only composed of a puriform secretion, and an increased discharge of mucus, circumstances usual in other membranous inflammations. It is worthy of remark, that, by such a state of the inner surface of the lungs, the constitution is affected nearly in the same manner as when they are ulcerated; on which account, the diagnosis of pulmonary consumption must often be rendered obscure and difficult.

The treatment, employed in the above cases, proved likewise successful in two cases of Peripneumony, where bleeding from the arm had been disadvantageous.

Between the 1st of January and the 20th of March, many cases occurred of the complaint, described by Dr. Huxham under the title of "Slow nervous Fever*." This disease does not arise from contagion; nor seems

* Essay on Fevers, chap. vii. See Langrish on Fevers, chap. 10, 11, 12.

to become infectious in its course. The exciting causes of it are fatigue, watching, anxiety, and poor diet. Its progress is slow and insidious; so that the first accession can seldom be marked: neither has it any certain termination or crisis, but assumes, at its conclusion, a hectical form, which continues some weeks before the patient's strength and health can be fully reinstated. In these respects, it differs from fevers produced by contagion; and also in another particular, that the tongue usually remains moist, through its whole course. Aphthous ulcerations in the fauces are common to both diseases.

One case of this fever terminated about the 20th day by a profuse hæmorrhagy from the bowels, which proved fatal within twelve hours. The patient was an unmarried and disappointed lady, 35 years of age.

The other acute complaints, that remain to be noticed, took place chiefly during the frost in February and March; and consisted of a few cases of Rheumatism, Sore-throats of the species termed by medical writers erysipelatous, phlegmonic Erysipelas of the face, febrile Nettle-rash, Inflammation of the bowels, and peritoneal Inflammation.

Respecting chronic diseases, some obser-

vations will be made in future Numbers; the only cases, connected with the present season of the year, are eruptions on the skin. These have principally been the Itch; the Prurigo, or an universal itching of the skin without pustules; the papulous eruptions termed by the antients, Lichen; the Dry or Scaly Tetter; the Impetigo, or Humid Tetter; and Herpes labialis. The last is an eruption of inflamed, watery pustules about the mouth, which is sometimes produced by cold, and seems idiopathic; but it often occurs as a secondary complaint, affording a sudden crisis of pneumonic inflammation, and other internal disorders.

I subjoin the number of deaths stated in the London Bills of Mortality, between the 22d of December 1795, and the 22d of March 1796.

Abscess	5	Chicken-pox	1
Abortive	26	Child-bed	35
Aged	204	Cold	5
Ague	2	Colic	1
Apoplexy	29	Consumption	1081
Asthma	69	Convulsions	871
Bleeding	6	Croup	3
Bed-ridden	1	Dropsy	173
Brain Fever	2	Dropsy on the brain	2

Fever	338	Rheumatism	2
French Pox	11	Scurvy	2
Gout	22	Small-pox	574
Gravel	5	Sores	1
Grief	1	Sore-throat	5
Hooping Cough	95	Spitting of blood	1
Jaundice	15	Still-born	165
Jaw locked	1	Stone	4
Inflammation	73	Stoppage of the Stomach	2
Lethargy	3	Strangury	1
Lunatic	22	Suddenly	29
Measles	73	Teeth	100
Mortification	40	Thrush	15
Palsy	14	Water in the head	23
Pleurisy	4	Worms	3
Rupture	5		

It appears, that, of 4115 persons, 1436 died under two years of age; 275 between seventy and ninety; and 13 between ninety and one hundred.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of March to the 20th of April.

INSTEAD of mentioning in a cursory manner the series of diseases which prevailed during the last month, I think it will be both correct and useful to present a tabular view of all the cases immediately under my own notice: by that means, the proportion of acute to chronic complaints, and of the former to

each other, will at once appear. Such a list, being made on a tolerably extensive scale, may serve as a specimen of general practice. In order to have a more complete and accurate account of the prevailing diseases, it would be necessary that the practitioners, who superintend the numerous medical institutions in this metropolis, should publish monthly or quarterly the result of their experience, which would be particularly valuable, since their observations must be made among the class of people most exposed to the vicissitudes of the seasons, and to other causes of disease.

In the subsequent table, the disorders of infants under two years of age are put down separately.

ACUTE DISEASES.

Catarrh	16	Gout	1
Inflammatory Sore-throat	4	Contagious, malignant Fever	11
Aphthous Sore-throat	3	Slow Fever	4
Hæmoptoë, or Spitting of blood	4	Small-pox	5
Ophthalmia	1	Measles	3
Acute Rheumatism	6		

CHRONIC DISEASES.

*Asthenia	15	Chorea (St. Vitus's Dance)	1
Hysteria	1	Epilepsy	2

* Sauvages's Nosology, cl. vi. ord. 4. g. 21.

Hydrocephalus	1	Fluor albus	5
Cough, and Chronic Dyspnœa	43	Gravel and Dysury	4
Pulmonary Consumption.	11	Chronic Rheumatism	12
Dyspepsia or Indigestion.	11	Sciatica	3
Jaundice	1	Rheumatic Tooth-ache	4
*Gastrodynia biliosa	2	Paralysis	2
†Enterodynia	10	Scrophula	6
Obstipatio	2	Lichen	2
Diarrhœa	6	Itch and Prurigo	8
Tape Worm	1	Purpura, or Landscurvy.	3
Abortion	1	Dry or Scaly Tetter	5
Anasarca	5	Impetigo, or Humid Tetter	1
Encysted Dropsy	1	Shingles	1
Chlorosis	6		

PERIODICAL DISEASES.

Tertian	4	Hectica adolescentium	3
Quotidian	1	Hemicranium, or periodical Head-ache	1
Hectica senilis	2		

DISEASES OF INFANTS.

Hooping Cough	5	Scald-head	4
Catarrhal Fever	8	Papulous eruptions	6
Measles	6	Tabes mesenterica	3
Small-pox	4	Prolapsus ani	1
Thrush	2	Worms	4
Crusta lactea	1	Convulsions	3

The aphthous Sore-throat, mentioned in the above list of acute diseases, was attended

* Sauvages's Nosology, cl. vii. ord. 4. g. 20.
† Ditto . . . . . cl. vii. ord. 4. g. 21.

with an elongation of the uvula and velum pendulum palati, with a quick, weak pulse, great languor and debility, and numerous small ulcerations on the tongue, fauces, and inside of the cheeks. This complaint has occurred frequently since the abatement of the Scarlatina anginosa: it appears to be infectious, but has not in any instance proved dangerous.

Two of the cases of Hæmoptoë, in which blood-letting, cupping, blisters, &c. were timely employed, terminated without producing any confirmed ulcerations of the lungs; although they were, for more than a fortnight, attended with a hard cough, thick, fetid expectoration, hectic fever, and diarrhœa.

Of the contagious Fevers, only one terminated fatally. The patient was a girl, fourteen years of age; she took the fever from her brother, and died at the end of the first week, in consequence of a violent hæmorrhagy from the nose. A young man of seventeen had two or three returns of a similar hæmorrhagy, within the first ten days of the fever; but is at present recovering. Seven, out of the eleven cases of this disease, were in one family. The infection seemed to arise

from an infant who died about the sixth day of the confluent Small-pox, attended with an eruption of purple spots, and a hæmorrhagy*. Every individual of the family was taken ill of the fever on the seventh night after the death of the child. An antimonial emetic was immediately given to each of them, and a dose of calomel the next morning. In the children, and servants, the fever was brought to a crisis on the fourth day. The father and mother, who had aphthous ulcerations in the fauces, began to recover on the fourteenth day of the disease.

The Measles were, in general, much more severe last month than in January and February. They were succeeded, in children, by obstinate coughs, and difficulty of breathing, with febrile symptoms long continued; by glandular swellings, and eruptions of painful inflamed pustules, some of them being nearly as large as boils.

The cases of Pulmonary Consumption were not recent cases: that disease is, at some

* It was probably incorrect to refer the disease thus produced to the head of Contagious, malignant Fever. I have since repeatedly seen a febrile complaint, attended with aphthæ, originate from intercourse with patients labouring under the purple Small-pox, and from exposure to other putrescent effluvia.

seasons, much aggravated, particularly when the wind blows from the east or north-east quarters, as during the last month. The cough, fever, and difficulty of breathing, increase, and are attended with violent pain or stitches in the side, with profuse night-sweats, and diarrhœa. These symptoms being occasionally palliated by medicines and regimen, persons in low life struggle with the disorder amid their occupations, and prolong a miserable existence for several years.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of April to the 20th of May.

I SHALL continue to exhibit a monthly list of the diseases presented to my observation, under nearly the same arrangement as in the report for the last month. This plan seems likely to afford some satisfactory information respecting the predominant complaints, when added to a general account of them.

ACUTE DISEASES.

Catarrhal Fever.....12	Acute Rheumatism 2
Peripneumony..... 3	Hooping Cough 6
Pleurisy 1	Measles 9
Inflammatory Sore throat 6	Small-pox 15
Ulcerated Sore-throat... 1	Erysipelas of the face ... 1
Aphthous Sore-throat... 3	Slow Fever..... 4
Malignant, contagious Fever 2	Child-bed Fevers 5

CHRONIC DISEASES.

Cough and Chronic Dyspnœa.....30	Prolapsus uteri 2
Spitting of blood..... 8	Dyspepsia 19
Pulmonary Consumption 6	Gastrodynia..... 6
Chronic Rheumatism ...13	Enterodynia.....10
Sciatica..... 1	Diarrhœa..... 7
Lumbago 3	Hernia..... 1
Dropsy..... 5	Tape Worm 1
Asthenia.....24	Round Worm (Lumbricus)..... 2
Hysteria..... 1	Ascarides..... 4
Syncope'..... 1	Scirrhous liver..... 1
Cephalæa..... 6	Gravel and Dysury..... 4
Paralysis 3	Axillary Abscess..... 1
Hæmatemesis, or Vomiting of blood..... 3	Suppuration in the ear .. 2
Intestinal hæmorrhagy .. 1	Scrophula 5
Menorrhagia 2	Tabes mesenterica..... 6
Abortus 1	Convulsions in infants... 2
Fluor albus 4	Lichen 3
Amenorrhœa and Chlorosis 10	Itch and Prurigo.....16
Scirrhus uteri..... 2	Lepra Græcorum 1
	Dry Tetter..... 2
	Icthyosis 1

Erythema	2	Porrigo	4
Purpura	1	Papulous Eruptions peculiar to infants	3
Impetigo	3	Ecthymata, or large inflamed pustules	2
Vari	2		
Noli me tangere	2		

PERIODICAL DISEASES.

Tertian	5	Hectica adolescentium	2
Hectica senilis	1	Hectica infantilis	1

All the cases of catarrhal and pneumonic Inflammation terminated favourably. The medical treatment of them was by local bleeding, blisters, antimonials, pediluvium, &c. It is remarkable, how few cases of this kind, in London, admit of repeated bleeding from the arm.

The case of ulcerated Sore-throat was attended with a weak and quick pulse, great languor and debility, and large ulcerations on the tonsils, succeeded by thick, white sloughs. As soon as these were removed the ulcers presently healed by a free use of the bark.

The Small-pox and Measles have prevailed more, during this spring, than has been known for many years past. They were diffused, in the course of last month, through all the villages adjacent to the metropolis. I cannot

here pass over a striking instance of the bad effects arising from partial inoculation. A child was inoculated, in April, whose parents kept a shop in a court, consisting of about twenty houses. As the inhabitants repaired every day for necessary articles to the source of infection, the consequence was, that seventeen persons were affected with the Small-pox in the natural way, within a fortnight after the child's recovery; and eight of them died of the disease.

The Hooping Cough was unusually violent and obstinate. One infant died of it before the febrile stage had in any degree abated.

In persons, whose lungs did not seem to be ulcerated, but who had for a long time been affected with cough and difficulty of breathing, those complaints were much aggravated by the irregular state of the weather; and terminated, in several instances, by a spitting of blood.

The cases of Rheumatism, of Diarrhœa, and other disorders of the bowels, likewise originated, in general, from long exposure to a cold and humid atmosphere.

In the list of periodical diseases, the complaint termed Hectica adolescentium fre-

quently affects young persons, during the period of their growth, after the age of puberty. It is characterized by febrile paroxysms occurring every day, pain in the limbs, often with painful swellings in the joints*, loss of sleep and appetite, and great emaciation. If a cough does not supervene, the patients recover in ten or twelve weeks.

A species of Hectic takes place in infants† and children from constitutional circumstances, without any apparent local affection. It is attended with a very quick pulse; with heat and flushing during the paroxysm; and throughout with an extreme degree of irritability and inquietude; sometimes with loss of appetite, sometimes with a craving for strong food; and an equal irregularity respecting the state of the bowels. These symptoms continue for a length of time, and occasion a wasting, with loss of strength: they usually precede a considerable increase of stature.

The Hectica senilis is described by Hoffman, tom. ii. p. 177.

* See Musgrave, De arthritide ex Chlorosi, &c. cap. 3.

† Sydenham, op. un. p. 504. The Febris lenta infantum, Hoffman, tom. ii. p. 177, is symptomatic of pain, with swelling of the abdomen, and a diseased state of the mesenteric glands.

BILLS OF MORTALITY,

From the 22d of March to the 24th of May 1796.

Abscess	3	Inflammation	56
Abortive	20	Livergrown	2
Aged	184	Lethargy	1
Ague	3	Lunatic	16
Apoplexy	11	Measles	36
Asthma	64	Mortification	35
Bleeding	1	Palsy	20
Bed-ridden	1	Pleurisy	2
Cancer	7	Rupture	3
Child-bed	29	Scurvy	1
Cold	1	Small-pox	478
Colic	1	Sores	2
Consumption	743	Sore-throat	8
Convulsions	673	St. Anthony's Fire	1
Cough	3	Still-born	124
Croup	6	Stoppage in the stomach	3
Dropsy	121	Strangury	1
Fever	230	Suddenly	16
French Pox	2	Swelling	1
Gout	16	Teeth	73
Gravel	6	Thrush	4
Grief	1	Water in the Head	16
Hooping Cough	144	Worms	2
Jaundice	21		

Total of deaths 3187: died under two years of age 1129; 240 between seventy and ninety; 7 between ninety and one hundred.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of May to the 20th of June.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Measles	9	Peritoneal Inflammation.	4
Scarlatina anginosa	7	Acute Rheumatism	4
Small-pox	7	Slow Fever	3
Chicken-pox	1	Bilious, or Summer Fever	3
Malignant, contagious Fever	1	Child-bed and Milk Fevers	6
Hooping Cough	5		
Catarrh	6		

CHRONIC DISEASES.

Cough and Chronic Dyspnœa	22	Fluor albus	3
Spitting of blood	5	Scirrhus uteri	1
Pulmonary Consumption	12	Prolapsus uteri	2
Chronic Rheumatism	6	Prolapsus ani	1
Dropsy	4	Hæmorrhoids	2
Asthenia	21	Hernia	3
Hysteria	2	Gravel	2
Cephalæa	6	Ischuria	1
Apoplexy	1	Ascarides	2
Paralysis	4	Gastrodynia	5
Chlorosis and Amenorrhœa	8	Enterodynia	3
Menorrhagia	5	Scirrhous liver	2
		Jaundice	2
		Bilious vomiting	4

Diarrhœa	5	Nettle-rash	1
Lichen	2	Noli me tangere	1
Dry Tetter	1	Cancer	2
Itch and Prurigo	6		

PERIODICAL DISEASES.

Quotidian	2	Hemicranium	2
Tertian	3	Hectica adolescentium	1
Semitertian	1	Hectica senilis	1

DISEASES OF INFANTS.

Catarrhal Fevers	4	Scrophula	4
Fevers from teething and indigestion	6	St. Vitus's Dance	1
Tabes Mesenterica	2	Crusta lactea	1
Rickets	3	Dandriff	2
		Scald-head	3

The seven cases of Scarlatina anginosa were in the children of one family, residing near the Magdalen Hospital. A boy, twelve years of age, took the disease first; all the rest were infected by him within a fortnight; but they began to sicken on different days. The father and mother escaped the contagion; nor did it extend to any families in the neighbourhood. This disorder was attended with spreading ulcerations on the tonsils, somewhat deeper than is usual. The eldest daughter, twenty-two years of age, had nearly sunk under a violent hæmorrhagy from the nose, which occurred twice, though she had the ca-

tamenia at the same time. One or two others were affected with diarrhœa, bilious vomitings, head-ache, and slight delirium. The scarlet rash extended over the whole body. There was in all the patients a quick, small, and irregular pulse, with great languor, faintness, and depression. These symptoms suddenly disappeared on the eighth or ninth day of the disease, and were not succeeded, as frequently happens, by anasarcous swellings of the lower extremities.

The best mode of practice, in the Scarlatina anginosa, is to administer gentle emetics repeatedly, during its first stage, according to the plan recommended by Dr. Withering, in a judicious treatise on this disease *. It may be observed that, when an emetic wholly fails in its operation, the patient seldom recovers.

The Synochus † biliosa (Sauvages de Fe-

* Account of the Scarlet Fever and Sore-throat, as it appeared at Birmingham in 1778.

† This nosological distinction has not been generally recognized by succeeding writers on fever. The Synochus, Synochus biliosa, or Summer fever of Dr. Willan, appears to be a milder variety of Typhus, connected for the most part with disturbance of the biliary system; and he has himself pointed out its ready conversion, in particular seasons and situations, into the more violent and fatal forms of that disease. See page 163; and Account of Diseases from Sept. to Oct. 1797, and from Aug. to Sept. 1799.—A. S.

bribus), though a disease frequently occurring, during the summer months, in the vicinity of London, has not been accurately described by our practical writers, who seem, in general, to have confounded it with the malignant or putrid fever. Its symptoms are, however, very different; neither is it communicated by contagion. It commences with irregular shiverings, which are afterwards succeeded by a great and continued heat of the skin; flushing of the face; frequent nausea, with a sensation of heat in the stomach and bowels; a sense of oppression in the chest, with tremors, panting, and inquietude; a white parched tongue, and unquenchable thirst. The pulse is always very quick; and there is a violent, throbbing pain of the head, which prevents sleep, and often produces delirium. The temper of mind is much altered by this disease: under its influence, patients, who in health are of a meek and serene disposition, become fretful and turbulent, and are moved to passion on the slightest occasions. The state of the bowels is very uncertain; but, after costiveness for several days, a diarrhœa usually takes place on a sudden, attended with pain, gripings, and bilious discharges. The urine is also very variable in its appear-

ances; being sometimes clear, and of a high orange colour; sometimes greenish, and a little turbid, like punch: at other times, it is made white; and, after standing some hours, deposits a white, flaky sediment. On the seventh or eighth day, jaundice frequently takes place, giving a yellow tinge to the whole surface of the body, without any confirmed obstruction of the biliary ducts. This appearance is not unfavourable.

The duration of the Synochus is from eighteen to twenty-eight days. In some cases, after the second week, it begins to remit; and has an exacerbation or paroxysm every day, which terminates by gentle sweating. It is often thus protracted, in a hectical form, to the thirty-sixth, fortieth, or forty-second day. The occasional or exciting causes of it are fatigue in hot weather, anxiety, watching; and drinking cold water, after the body has been much heated by labour or travelling. This is the only acute disease in the southern part of Britain, which has any relation to the Continued or Remitting Fevers of hot climates. Such is the mildness of its symptoms, that we should vainly attempt to arrange it with any analogous species of fever described by Hippocrates, Galen, or the Arabian phy-

sicians. When the febrile diseases, produced here by the heat of summer, are farther compared with those which occur in the East* and West† Indies, or nearer to the equinoctial

* "Febres continuæ plerumque cum tanto furore *hic* mortales invadunt, ut tanquam attonitos de ratione mentis statim dejiciant, et sæpe intra paucissimos dies, imo aliquandò horas, cum phrenitide, ac continuo delirio ægros e vitâ rapiant. Adsunt perpetuæ vigiliæ, vomitus varii coloris, præcipuè viridis ac æruginosæ bilis. Externa rigent. Calor internè cum ingenti siti vitales ac naturales facultates depascitur." Bontius, De Febribus in Indiis, cap. 14.

† "The fever invades the patient in a most precipitate manner. The only notice it gives of its assaults is a momentary chilness and shivering, which is soon succeeded by a burning heat, which disperses itself universally over the body, but is felt more intensely about the præcordia. This heat is attended with a high, strong, and rapid pulse, heaviness in the eyes, and throbbing pain in the head, and violent beating of the temporal arteries, a thick and laborious respiration, nauseousness and reaching to vomit, and, when any thing is thrown up, it is of the bilious kind: to these we may add great anxiety, pain in the back and loins, and an uneasy lassitude in all the limbs. The symptoms subsequent to these (which often discover themselves in the space of twelve hours from the invasion) are a dry, harsh, rough, and discoloured tongue, insatiable thirst, soreness all over the body, great restlessness, and deliria. In the last stage, the patient labours under a deep coma; oppression of the præcordia; heaving of the lungs; an interrupted respiration; tremblings of the tendons; convulsions; and cold, clammy sweats. These are the three advances to be taken notice of in this fever, which usually terminates in a favour-

line *, we shall be fully sensible of the advantages of our own clime.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of June to the 20th of July.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Measles	7	Catarrh	5
Scarlatina	6	Acute Rheumatism	3
Small-pox	9	Gout	1
Swine-pox	3	Summer Fever	4
Aphthous Sore-throat	3	Ephemera	5
Ulcerated Sore-throat	1	Child-bed Fever	4
Peripneumony	1		

able crisis, or the death of the patient, about the fourth day after the attack." Towne, on the Diseases in Barbadoes, p. 22.

* For an accurate account of the Fever at Free-Town, in the latitude of 8°, see Dr. Winterbottom's "Medical Directions for the Use of the Vessels in the Service of the Hon. Sierra-Leone Company;" a work, which, if properly circulated, would be of the greatest utility to navigators or settlers on the coast of Africa, and which merits the attention of medical practitioners intending to fix their residence in a tropical country.

CHRONIC DISEASES.

Chronic Rheumatism	4	Hæmorrhoids	3
Asthenia	15	Devonshire colic	1
Paralysis	3	Scirrhous liver	2
Apoplexy	1	Jaundice	1
Epistaxis	1	Cough and Chronic Dyspnœa	13
Cephalæa	3	Pulmonary Consumption,	9
Epilepsy	1	Spitting of blood	3
Hysteria	4	Anasarca	5
Chlorosis and Amenorrhœa	7	Land Scurvy	1
Menorrhagia	5	Dry Tetter	2
Fluor Albus	5	Impetigo	2
Prolapsus uteri	1	Lichen	1
Abortion	2	Nettle-rash	2
Gravel and Dysury	3	Itch	9
Dyspepsia	14	Prurigo	5
Gastrodynia	15	Inflamed Pustules	2
Enterodynia	9	Shingles	2
Bilious vomiting	3	Noli me tangere	2
Intestinal hæmorrhagy	4		

PERIODICAL DISEASES.

Tertian	1	Hectica	3
Quotidian	1		

INFANTILE DISEASES.

Hooping-cough	8	Scrophula	6
Catarrhal Fever	5	Rickets	3
Dentition	3	Hydrocephalus	1
Diarrhœa	3	Crusta lactea and Scald-head	5
Tabes mesenterica	6	Papulous eruptions	6
Worms	7		

The Small-pox, during the whole of the last spring, was the leading epidemical complaint in London, and its vicinity. The disease continues to rage with unabated violence; and, since the hot weather commenced, has appeared in its most malignant form, proving generally fatal.

The Measles seem to be, at present, declining; but are likely to be succeeded by the Scarlet Fever, which has been already diffused to a considerable extent. This disease, as is usual in the summer months, exhibits a mild train of symptoms, and soon terminates favourably, without producing any material affection of the throat. For some years past, it has always been most virulent and dangerous in the months of October and November; but generally ceased on the first appearance of frost.

The Hooping-cough is yet very prevalent. It has been attended with a considerable degree of fever, which continued two weeks or upwards; and, in this stage, has been occasionally fatal to weakly, delicate children.

The Ephemera is described at large by Sauvages, Nosol. Method. cl. ii. ord. i. It has been noticed by most of the antient medical writers*, according to whom, "The mildest

* Galen de diff. Febr. lib. ii. cap. 1; and Actuar. Meth. Med. lib. ii. cap. 1; and Alex. Trall. lib. xii. cap. 1.

of all fevers is the Ephemera, which arises from slight occasional causes; from cold or heat, from pain or anger, from fatigue, indigestion, or anxiety. It is called ephemeral, because it lasts but for a day. Sometimes, however, it extends to the fourth day."

The most predominant among chronic complaints, as will appear from the list, are disorders of the stomach and bowels, accompanied with violent pain, bilious vomiting or diarrhœa, hæmorrhagy, &c. These symptoms may be somewhat aggravated by the sudden alternations of heat and cold, which have taken place during the present month; but, I am sorry to add, they must principally be referred to the intemperate use of spirituous liquors; a cause of disease more pernicious to the labouring class of people in this city, than the combined influences of its air, climate, occupations, unseasonable amusements, contagious and other prejudicial effluvia.

BILLS OF MORTALITY,

From the 24th of May to the 26th of July.

Abscess	5	Asthma	41
Abortive	16	Bleeding	2
Aged	113	Cancer	14
Apoplexy	17	Child-bed	36

Consumption	631	Measles	44
Convulsions	533	Mortification	37
Croup	2	Palsy	12
Dropsy	124	Pleurisy	1
Evil	1	Rupture	3
Fever	243	Rheumatism	1
French Pox	3	Small-pox	797
Gout	17	Sore-throat	5
Gravel	1	Still-born	84
Grief	3	Stoppage in the stomach,	2
Gripes	2	Suddenly	14
Head-ache	1	Teeth	58
Hooping-cough	82	Thrush	5
Jaundice	8	Water in the head	6
Inflammation	45	Worms	3
Lunatic	12		

Of the above number, 1021 died under two years of age; and 57 between eighty and a hundred.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of July to the 20th of August.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Small-pox	16	Summer Fever	8
Measles	5	Child-bed and Milk Fevers	5
Scarlatina	6	Erythematous Sore-throat,	4
Hooping-cough	14		

Ulcerated Sore-throat...	1	Peritoneal Inflammation,	1
Aphthous Sore-throat...	3	Erysipelas of the face....	1
Tracheal Sore-throat....	1	Acute Rheumatism.....	5
Catarrh.....	5	Fevers in Infants.....	8
Peripneumony.....	3		

CHRONIC DISEASES.

Asthenia.....	22	Scirrhous liver.....	2
Hysteria.....	2	Jaundice.....	1
Syncope.....	3	Tabes mesenterica and Worms.....	6
Chlorosis.....	10	Dentition.....	4
Scrophula and Rickets..	7	Menorrhagia.....	3
Dropsy.....	6	Fluor albus.....	7
Chronic Rheumatism...	6	Scirrhous uterus.....	2
Sciatica.....	3	Gravel and Dysury.....	4
Pain of the side.....	3	Lumbar Abscess.....	2
Apoplexy.....	3	Abscess of the cheek....	1
Paralysis.....	6	Herpes.....	1
Hydrocephalus.....	1	Impetigo.....	3
Cephalæa.....	5	Itch and Prurigo.....	6
Cough and Consumption,	15	Scaly Tetter.....	2
Gastrodynia.....	14	Nettle-rash.....	3
Dyspepsia.....	9	Inflamed Pustules.....	2
Enterodynia.....	10	Porrigo.....	6
Diarrhœa.....	5	Sycosis.....	1
Colica Pictonum.....	1	Noli me tangere.....	2
Hæmorrhoids.....	2	Morbus pedicularis.....	1
Contraction of the Œsophagus.....	1		

PERIODICAL DISEASES.

Quotidian.....	1	Tertian.....	1

The Scarlet Fever retains the same mild form as during the last month. It does not spread much within the city, but extends to the adjoining villages; more especially on the southward of London, to Newington, Kennington, Stockwell, Mitcham, Streatham, &c. &c.

The varieties of the Sore throat, mentioned in the list of acute diseases, have, as I understand from other practitioners, been very prevalent during the two last months. They were, however, in general, more troublesome and lingering than dangerous.

All the cases of Peripneumony, though attended with a spitting of blood, had a favourable termination. They occurred, during the irregular temperature of the air, at the latter end of July. Since the commencement of warm, settled weather, I have not observed any inflammatory complaint.

The case of Erysipelas was slight. This disease was divided by the antients into Erysipelas phlegmonodes, and Erysipelas œdematodes. For the former, they properly direct blood-letting, purgatives, and a cooling diet. The latter, with less redness, exhibits more tumefaction. It is attended with a

quick but weak pulse, with delirium or coma, and has a tendency to gangrene, which cannot always be prevented by the use of Peruvian bark, mineral acids, and a cordial regimen. The œdematic, or gangrenous form of the Erysipelas is the most usual in London. However, the phlegmonic species, with a sizy state of the blood, may be occasionally seen during the spring season.

The Small-pox and Hooping-cough are yet very generally diffused, and seem much aggravated in consequence of the heat of the season. These two complaints have been intimately connected for several months past. In many instances, the paroxysms of the cough continued, without abatement, through the whole course of the supervening Small-pox. The Hooping Cough, in other cases, first commenced during the eruption of the Small-pox, and remained a long time after it, without any material alteration. These observations tend to set aside an established opinion among physiologists, that two specific diseases, at least two specific contagions, cannot actuate the human constitution at the same time*. That the operation of one con-

* Two interesting cases, in which the individuals were at the same time affected with the Measles and Small-pox,

tagion is, occasionally, suspended, while the body is under the influence of another, may be granted; but I am convinced, from a variety of cases, that this is not an universal law.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of August to the 20th of September.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Small-pox	11	Scarlatina anginosa	13
Measles	3	Erysipelas	2

were noted by Dr. P. Russell, when those diseases were epidemical at Aleppo; the respective eruptions appeared together, and "distinctly pursued their regular course." See Transactions of a Society for the Improvement of Medical and Chirurgical Knowledge, Vol. II. page 94-5. Professor Thomson, of Edinburgh, has likewise related three cases of the co-existence of Measles and Small-pox, in his Account of the Varioloid Epidemic of Scotland (page 151): instances analagous to these are probably familiar to most practitioners. I may be allowed to mention here that a child has recently been brought to me, in whom the lenticular Varicella had supervened to the pustular Scabies: the Itch had been received from an elder sister, and yielded readily, after the decline of the Varicella, to the ordinary mode of treatment: the Chicken-pox extended itself to another child in the same family.—A. S.

Aphthous Sore-throat...	3	Malignant or Putrid Fever.....	6
Ulcerated Sore-throat...	2	Gout.....	1
Hooping-cough.....	5	Catarrh.....	3
Dysentery.....	4	Peripneumony.....	2
Cholera.....	5	Peritoneal Inflammation,	2
Summer Fever.....	7	Acute Diseases of Infants,	7
Puerperal Fever.....	2		
Acute Rheumatism.....	2		

CHRONIC DISEASES.

Asthenia.....	18	Abortion.....	2
Syncope.....	2	Chlorosis and Amenorrhœa.....	7
Hysteria.....	1	Scirrhus uteri.....	1
Epilepsy.....	1	Mammary Abscess.....	2
St. Vitus's Dance.....	1	Ulcer of the Kidney....	1
Paralysis.....	5	Stone and Gravel.....	5
Anasarca.....	4	Prolapsus uteri.....	1
Chronic Rheumatism....	7	Scrophula and Rickets...	8
Lumbago.....	1	Tabes mesenterica.....	3
Sciatica.....	1	Lepra Græcorum.....	1
Cephalæa.....	3	Tooth-rash [Strophulus confertus].....	2
Cough and Consumption,	23	Scald-head.....	2
Dyspepsia.....	8	Crusta lactea [Porrigo larvalis].....	1
Gastrodynia.....	10	Impetigo.....	1
Enterodynia.....	8	Sycosis*.....	8
Diarrhœa.....	14	Itch and Prurigo.....	5
Jaundice.....	2		
Worms.....	3		
Menorrhagia.....	4		
Leucorrhœa.....	4		

The Scarlet Fever, which is now extensively diffused, has, since the beginning of

* See Celsus de Medicin. lib. vi. cap. 3.

September, assumed its more malignant and dangerous form; being attended with deep ulcerations of the throat, with a collection of tough phlegm in the fauces, and an acrimonious discharge from the nostrils, a weak and quick pulse, with interchanges of torpor, and violent agitation. In this form, the disease usually proves fatal to infants on the seventh or eighth day.

But few cases of the Measles occur at present; and the Small-pox seems considerably declining. The fatality of the latter disorder has been, during the last half year, uncommonly great. It appears, from the London bills of mortality, that 1050 persons died of the Small-pox in 1795; whereas, between the 1st of January and 25th of August, in the present year, the number of deaths has amounted to 2196. During the summer months, the deaths are stated in the bills as follows: in May, 331; in June, 340; in July, 412; in August, 360.

Cases of Cholera have been few and slight during the present season; owing, perhaps, to the uniformly warm weather which prevailed at the latter end of August and the beginning of September. The Dysentery has also been very slight: this disease has not

been epidemical in London since the autumn of the year 1780.

The Synochus, or Summer Fever, which was formerly described, begins to change its form during the month of September; and assumes, in the second week of its course, the characteristics of the malignant or putrid fever; often proving fatal about the eighteenth or nineteenth day, if timely care be not taken to check its progress.

In September, also, Fevers usually appear, which, from their commencement, exhibit symptoms of malignancy; being attended with a brown dry tongue, violent pain of the head, delirium, or coma, deep-seated pains of the limbs, petechial spots, and haemorrhagy. These fevers become highly contagious, especially when they occur in close confined situations, and in houses where little attention is paid to ventilation or cleanliness. The disease is extended by infection during the months of October and November, but its progress is generally stopped by the frosts of December.

BILLS OF MORTALITY,

From the 26th of July to the 27th of September.

Abscess	2	Jaundice	13
Abortive	17	Inflammation	71
Aged	114	Lunatic	13
Apoplexy	19	Measles	50
Asthma	32	Mortification	34
Bleeding	4	Palsy	4
Bedridden	2	Pleurisy	1
Cancer	10	Piles	1
Child-bed	40	Scarlet Fever	1
Consumption	595	Small-pox	833
Convulsions	587	Sore-throat	4
Croup	3	St. Anthony's Fire	3
Dropsy	110	Still-born	117
Evil	2	Stoppage in the stomach,	1
Fever	247	Suddenly	19
French Pox	5	Swelling	1
Gout	19	Teeth	41
Gravel	3	Thrush	12
Gripes	6	Ulcers	1
Head-ache	2	Worms	3
Hooping-cough	79	Water in the head	8

ACCOUNT OF DISEASES IN LONDON,

From the 20th of September to the 20th of October.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Scarlatina anginosa	11	Aphthous Sore-throat	3
Measles	2	Inflammation of the bowels	1
Small-pox	7	Peritoneal Inflammation	2
Hooping-cough	4	Low Fever	1
Malignant Fever	4	Puerperal Fever	2
Acute Rheumatism	11	Acute Diseases of Infants	18
Catarrh	16		
Sore-throat	4		

CHRONIC DISEASES.

Asthenia	14	Diarrhœa	10
Hysteria	6	Cough and Dyspnœa	39
St. Vitus's Dance	1	Pulmonary Consumption	8
Anasarca	6	Pleuritic Stitches	3
Chronic Rheumatism	9	Spitting of blood	3
Lumbago	2	Hæmorrhagy from the nose	2
Paralysis	3	Hæmorrhagy from the kidneys	2
Apoplexy	2	Vomiting of blood	1
Hydrocephalus	1	Menorrhagia	3
Cephalæa	4	Fluor albus	5
Melancholia	1	Prolapsus uteri	1
Dyspepsia	9	Prolapsus ani	6
Chlorosis	3	Hernia	2
Gastrodynia	11	Scirrhous liver	1
Bilious vomiting	3		
Enterodynia	7		

Jaundice	2	Inflamed pustules	5
Gravel	2	Scald-head and Crusta lactea	6
Tabes mesenterica	6	Phthiriasis	1
Ulcer of the rectum	1	Itch	7
Dysphagia	1	Thrush	3
Lichen	1	Erythema	1
Scaly Tetter	2	Furunculi	2
Icthyosis	1	Anthrax	1
Nettle-rash	1	Lupus	1
Impetigo	1		

PERIODICAL DISEASES.

Quartan	1	Hectica senilis	2
Tertian	1	Hectica adolescentium	1

The Scarlet Fever, with a sore-throat, still continues to be the leading epidemic. This disease, however, has not generally been so violent as in some preceding years. Only one case, out of the eleven which occurred during the last month in my own practice, terminated fatally. An adult, in whom the rash was not considerable, but whose throat was very much ulcerated, became, on the third day of the eruption, suddenly frantic and ungovernable, the rash disappearing, and the ulcerations of the throat being almost instantly healed. This mode of termination is not unfrequent in the Scarlatina anginosa. The phrenetical state remains afterwards for one, two, or three weeks.

Both the Small-pox and the Hooping Cough, which were the prevailing complaints during many months of the present year, are now considerably on the decline.

Under the article " Fevers or Acute Diseases of Infants," are comprised catarrhal affections, the effects of dentition, with indigestion, and other complaints of the bowels, producing disorder of the constitution; from all of which, children have this month suffered extensively.

The irregular state of the weather for some time past has likewise produced in adults violent disorders of the bowels, hæmorrhagies, coughs, pleuritic stitches, and a variety of inflammatory complaints; among which, acute Rheumatism and catarrhal Inflammation were the most prevalent.

Contagious malignant Fevers bore a smaller proportion than usual to other acute diseases: neither have Intermittents this autumn been very numerous. The latter occur, for the most part, in persons who have resided some time in the neighbourhood of marshes. We must not, however, consider marsh effluvia as the universal cause of intermittents *;

* The late eminent Professor Gregory was accustomed to relate in his lectures, the occasional but rare occurrence, in

since it is found, that persons, constantly residing in the most healthy parts of the metropolis are sometimes affected with them, as happened in the two cases above put down amongst the periodical diseases.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of October to the 20th of November.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Catarrh	11	Malignant Fever	4
Acute Rheumatism	9	Small-pox	6
Peripneumony	2	Scarlatina anginosa	5
Hæmoptoë	2	Measles	3
Enteritis	1	Hooping-cough	3
Angina	3	Puerperal Fever	4
Otalgia*	3	Acute Diseases of Infants,	12

his own practice, of Intermittents arising, independently of any previous exposure to marsh miasmata, in elevated parts of Edinburgh. Dr. Bateman mentions a case of the same kind in a patient who had not quitted London for many years; and he cites, from the 'Medical Facts and Observations,' (Vol. VII.) three others, which were noticed by Dr. Beddoes, at Bristol, during a hard frost.—See his Reports on the Diseases of London, page 41.—These are, of course, to be regarded as exceptions merely to a general fact.—A. S.

* Otalgia inflammatoria; Sauvages, Nosol. Method.

CHRONIC DISEASES.

Asthenia	14	Fluor albus	4
Chronic Rheumatism	13	Dysury	1
Sciatica	2	Incontinence of urine	2
Pain of the Side	5	Scirrhous ovarium	1
Anasarca	5	Jaundice	2
Cephalæa	12	Umbilical Hernia	1
Vertigo	3	Prolapsus ani	1
Hemiplegia	2	Tabes mesenterica	3
Hypochondriasis	3	Crusta lactea	2
Cough, and Chronic Dyspnœa	33	Porrigo	3
Pulmonary Consumption,	9	Thrush	3
Pleuritic Stitches	3	Furunculus	2
Dyspepsia	7	Phlegmon	2
Gastrodynia	5	Erythema	1
Enterodynia	4	Herpes	2
Diarrhœa	7	Scabies	3
Chlorosis	7	Prurigo podicis	1
Intestinal Hæmorrhagy	1	Inflamed Pustules	2
Menorrhagia	6	Phthiriasis	1
		Scaly Tetter	6

PERIODICAL DISEASES.

Quotidian	1	Hectica senilis	2
Hectica infantilis	3	Hemicranium	1

From an inspection of the above list, it will appear that Catarrhal and Rheumatic Fevers have been the most predominant among acute diseases, since the last report. A cold, damp, and foggy atmosphere has also contributed to render them more severe than usual, and of longer duration.

One case of Peripneumony, which had

been neglected at its commencement, terminated in suppuration, and proved fatal at the end of the third week.

The two cases of Hæmoptoë also terminated fatally; several pints of blood, in a pure and fluid state, being on a sudden discharged from the lungs, in consequence of the rupture of some considerable vessels.

In the cases of Otalgia, after violent fever, delirium, and most excruciating pain, suppuration took place: the pus was discharged from the external meatus auditorius; and a thick, offensive matter issued from the internal ear into the fauces and nostrils.

The Hooping-cough, malignant Fevers, Small-pox, Measles, and Scarlatina anginosa, continue nearly in the same proportion as during the two preceding months. The Scarlatina anginosa has been very fatal in different quarters of the city.

In the list of Chronic Diseases, it seems proper to take some notice of the article Asthenia*, comprehending the disorders, in general denominated nervous, which have occurred in a great proportion, especially

* The Asthenia of the author is stated by Dr. Bateman (Reports on Diseases, p. 173), to be synonymous with the Febricula, or Little Fever, of Sir Richard Manningham, who has well described the disease.—A. S.

during the summer months. The state of Asthenia commences with general languor, a sense of lassitude, or aching in the limbs; and often with tremors. These symptoms are succeeded by shooting pains, head-ache, giddiness, and a strong disposition to sleep, even in the day-time. There is a sensation of faintness, or depression, referred to the stomach, which calls for a frequent supply of nourishment: but, as the craving is not seconded by a proportionate activity of the digestive powers, an overcharge soon takes place, and produces heartburn, flatulency, violent pains of the stomach, or nausea, with bilious vomitings, and diarrhœa. Females, in these circumstances, are distressed with a pain in the left side, sometimes alternating with the pain of the stomach.

This complaint takes away the ability of any considerable corporeal exertions; and also renders a long attention of the mind to any subject, not only difficult, but painful. The patient's temper becomes irritable, fretful, and capricious; the judgment is defective and irresolute; the imagination suggests nothing but gloomy ideas, often extending to despondency. No taste remains for accustomed amusements; but every feeling, every

sensation, seems unpleasant. The night-sleep is disturbed by frightful dreams and startings; and the patient awakes, in the morning, unrefreshed, or feeling as if much bruised and fatigued.

Sauvages, in treating of Asthenia, includes, under that title, the debility consequent on Fevers, Small-pox, Scurvy, Hydrocephalus, and several local complaints. He farther observes, that in Asthenia there is a general weakness of all the limbs, the vital powers retaining their full vigour; or, that the debility of the voluntary motions is much greater than could be supposed from examining the state of the pulse. This remark seems to have been made with the view of supporting an hypothesis:—it has certainly no foundation in truth. The pulse, in every instance of Asthenia, is much reduced in force; in persons of the sanguine temperament, it is weak, and usually very frequent; but in melancholic habits, it is always feeble, slow, and languid. The former case constitutes the predisposition to Syncope, Hysteria, Chorea, Tetanus, and other convulsions; to Mania, Gastrodynia, Pyrosis, Diarrhœa, Tabes mesenterica, Fluor albus, Urticaria, Porrigo, and several pustular eruptions on the

skin. The latter predisposes to Indigestion, Hemicranium, Hypochondriasis, or Melancholia; to Epilepsy, Catalepsy, Ephialtes, Chlorosis, Constipation, chronic Rheumatism, Struma, internal Scirrhosities, Gravel, Dropsy, Diabetes, Purpura, and to Scaly Diseases of the skin.

Impure air, sedentary occupations, anxiety, and the irregular modes of living in a crowded city, are the external causes which lay the foundation of Asthenia. Not only those inhabitants are affected with it who live delicately, and withhold themselves from no indulgence, but labourers, servants, and all persons confined to a dull, unvaried track of business, are sensible of its effects. In summer, the complaint is much aggravated by the relaxing influence of a warm, dusty atmosphere; to which may be added the stifling heat reflected from continuous brick walls, windows, and a burning pavement. Unhappy they who are doomed to toil in such a situation throughout the year! who seldom enjoy the sun's direct rays in the colder seasons; and during the hot months "are never fanned by the western breeze." In the moments of languor, they court the delusive aid of spirits, by which all their complaints are

rendered more inveterate; they gradually droop and pine; become hectical, consumptive, or paralytic; or, falling into the state of chronic weakness, so well described by Dr. Withers, remain, through life, a burthen to their friends, the public, and themselves.

Patients in the first stage of Asthenia, or whose constitutions have not been too deeply injured by a long residence in town, retrieve their health by means of cold bathing, tonic medicines, and occasional excursions into the country. There, a change of pursuits, a more regular plan of diet and exercise, a more clear and purer atmosphere, the salubrious exhalations from growing vegetables, and the grateful stimulus of their odours, in a short time restore vigour to the body, and, along with it, firmness and serenity to the mind.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of Nov. to the 20th of Dec.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Catarrh	13	Enteritis	1
Pleurisy	1	Inflammatory Sore-throat,	4

Ulcerated Sore-throat...	3	Febrile Nettle-rash	1
Acute Rheumatism	6	Slow Fever.....	2
Hæmoptoë	5	Puerperal Fever	2
Malignant Fever	4	Dysentery	1
Small-pox	3	Tetanus	1
Scarlatina anginosa.....	3	Acute Diseases of Infants,	12
Measles	8		

CHRONIC DISEASES.

Cough and Dyspnœa ...	44	Chlorosis	8
Pulmonary Consumption.	9	Menorrhagia	3
Chronic Rheumatism ...	12	Scirrhus uteri.....	3
Lumbago	2	Scirrhus of the liver	2
Asthenia.....	12	Jaundice.....	1
Paralysis	2	Gravel	3
Anasarca	5	Renal Calculus	2
Œdema puerperale.....	2	Incontinence of urine....	1
Hysteria.....	2	Worms.....	4
St. Vitus's Dance.....	1	Ulcer of the rectum.....	1
Epilepsy.....	2	Tabes mesenterica.....	3
Cephalæa.....	3	Lepra.....	1
Gastrodynia.....	6	Impetigo.....	2
Enterodynia.....	5	Scaly Tetter.....	2
Diarrhœa.....	10	Thrush.....	3
Colica.....	2	Crusta lactea	1
Colica Pictonum	1	Itch.....	3

PERIODICAL DISEASES.

Quotidian.....	2	Hectica adolescentium...	3
Tertian.....	1	Hectica senilis.....	1
Hemicranium.....	1		

All the inflammatory and hæmorrhagic diseases, put down in the preceding list, were

brought to a favourable conclusion. The cases of Pleurisy, and Inflammation of the bowels, were so violent as to require repeated venæsection, along with the use of blisters, and other remedies.

Infants have been, during the present month, very generally affected with catarrhal Fever, a hard sounding cough, great difficulty of breathing, and a watery discharge from the nose and eyes. The above symptoms were relieved in a few days, by the application of leeches to the chest, by blisters, and antimonials.

The cold, wet, or damp weather, which succeeded the short frost at the beginning of the month, seems to have given rise to many putrid Fevers and ulcerated Sore-throats. These prove untoward and lingering; though I have not, as yet, met with any fatal case. A young lady, about fourteen years of age, after having had, for some days, slight specks of ulceration in the throat, was seized with all the symptoms of a malignant Fever: her tongue became dry and brown; a black crust covered the teeth; her eyes were dull and glassy; she was alternately delirious and comatose till the twelfth day of the fever, when a rash appeared, very much resembling the

Scarlatina, and was diffused over the whole body. It continued to the fourteenth day, and then disappeared: a complete crisis of the fever took place at the same time. The servant who attended was affected with a similar fever three days after the young lady's recovery, but has not had either the sore-throat or the eruption on the skin.

The Measles are now more prevalent than the Small-pox or Scarlatina, and have been diffused to most of the villages near London: many infants have died of the cough and hectic fever which succeed them. According to the Bills of Mortality, not 200 persons died of the Small-pox in the month of November; whereas the number of deaths in July and August was 772. It is to be remarked, that the Bills only record the death of one person by the Scarlet Fever, between the 8th and 29th of November, a period during which there occurred many fatal cases of that disease.

The case of Tetanus was produced by a slight wound, at the root of the little toe, from a rusty nail. No material inconvenience was felt for some days after the accident; but it was finally succeeded by a locked jaw, pain at the sternum, irregular convulsive mo-

tions of the back and abdomen, violent cramps of the extremities, a very quick, small pulse, and occasional delirium. The patient's toe was at first swelled and inflamed: after the application of poultices for a day or two, it remained free from pain, but had always a livid appearance during the convulsions. He died at the end of a fortnight, being exhausted with extreme pain and irritation, from which medicine could afford him no more than a slight and temporary respite.

BILLS OF MORTALITY

From the 27th of September to the 27th of December.

Abscess	6	Falling Sickness	1
Abortive	43	Fever	450
Aged	354	Flux	7
Apoplexy	35	Gout	27
Ague	1	Gravel	3
Asthma	118	Grief	1
Bleeding	2	Hooping Cough	123
Bed-ridden	3	Jaundice	21
Cancer	21	Jaw locked	1
Child-bed	54	Inflammation	110
Cold	4	Lunatic	22
Consumption	1246	Measles	93
Convulsions	1117	Mortification	53
Croup	8	Palsy	18
Dropsy	184	Pleurisy	3
Evil	2	Quinsy	1

Rickets	1	Suddenly	33
Rupture	4	Swine-pox	1
Scarlet Fever	3	Teeth	80
Small-pox	778	Thrush	18
Sores	1	Tumor in the womb	1
Sore-throat	5	Ulcers	1
Spotted Fever	1	Vomiting	1
Stone	7	Water in the head	19
Stoppage of the stomach	2	Worms	1

Total of deaths 5089: of which, 1822 were of children under two years of age; 20 of persons aged between ninety and one hundred; and 2 upward of one hundred years.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of December 1796, to the 20th of January 1797.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Catarrh	23	Hooping Cough	4
Peripneumony	4	Measles	6
Acute Rheumatism	5	Scarlatina anginosa	1
Inflammatory Sore-throat,	1	Small-pox	5
Aphthous Sore-throat	3	Hæmoptoë	2
Otalgia	1	Hæmatemesis	1
Enteritis	2	Hæmaturia	1
Malignant Fever	2	Acute Diseases of Infants,	8
Slow Fever	1		

CHRONIC DISEASES.

Cough and Dyspnœa	50	Scrophula	3
Pulmonary Consumption,	14	Chlorosis	6
Chronic Rheumatism	8	Menorrhagia	2
Lumbago	2	Prolapsus uteri	1
Asthenia	7	Fluor albus	2
Dropsy	4	Mammary Abscess	2
Œdema puerperale	1	Scirrhous ovarium	1
Paralysis	2	Scirrhous liver	1
Cephalæa	5	Gravel and Dysury	6
Hydrocephalus	1	Thrush	3
Epilepsy	1	Shingles	2
Dyspepsia	7	Porrigo	2
Gastrodynia	7	Itch	3
Enterodynia	6	Boils	1
Colica Pictonum	2	Prurigo	1
Obstipatio	3	Intertrigo	1
Diarrhœa	7	Lepra	1
Worms	3	Purpura	1

PERIODICAL DISEASES.

Quartan	1	Hectica senilis	1
Hectica adolescentium	2		

The quick and irregular interchanges of frost, snow, and rain, during the present month, have been productive of Coughs, catarrhal Fevers, internal Inflammations, and an aggravated state of Phthisis pulmonalis.

Several persons, in the decline of life, have died suddenly from a violent attack of Catarrh, or the Peripneumonia notha of Syden-

ham, attended with a quick fluttering pulse, great difficulty of breathing, pain or oppression of the chest, head-ache, vertigo, and slight delirium; the cheeks being, at first, red and flushed, as Sydenham remarks, but presently becoming livid and bloated. Under these circumstances, a large effusion of lymph usually takes place into the cavity of the chest and pericardium. Blisters, diaphoretics, gentle purgatives, and preparations of squill, seem to be the remedies which afford most certain alleviation. Blood-letting is inadmissible: of those who have been bled, at any period of the disease, I scarcely ever recollect to have seen one survive; and am convinced, that Dr. Sydenham's mode of practice, in this complaint, would be almost universally destructive. The death of one patient was accelerated in consequence of the alarm and confusion occasioned by the dreadful fire at Mr. Meux's brewhouse, near which he resided.

Young persons, more especially females, are sometimes affected with the above species of Peripneumony; and have often so great a degree of dyspnœa, that they cannot lie down in bed, or take any sound sleep, for many successive nights: the pulse is feeble, and

very quick, there being not less than 140 or 160 pulsations in a minute. In this disorder bleeding is equally fatal to the young and to those of an advanced age: young persons, however, in general, recover, if proper and early attention be paid to them.

The insidious appearances of this complaint sometimes lead unexperienced or careless practitioners into another error. The fur upon the tongue, after a few days, assumes a brownish colour: this circumstance, added to the state of the pulse, the loss of strength, and the absence of cough, suggests the idea of a malignant or putrid Fever, if the attention be not directed to the heaving of the chest, and to the exciting cause of the disease.

The use of bark, wine, and aromatics, in such a case, it will appear evident, cannot be less pernicious than the opposite mode of practice, by repeated blood-letting, strong purgatives, nitre, &c. so often fatally adopted by those who prescribe to the name of a disease, without sufficiently considering the state of the constitution affected with it.

The Measles continue, in nearly the same degree, as stated for the two preceding months. The Scarlatina anginosa and Small-pox are still abating.

According to the London Bills of Mortality, there have died, between the 20th of December and the 17th of January, of the Measles, twenty-one; of the Scarlet Fever, three; of the Small-pox, ninety-seven.

In the general Bill for the year 1796, it appears, that 307 have died of the Measles; 3548 of the Small-pox; and 1547 in other acute diseases. On examining the Bills of Mortality, from the year 1628 to the present time, it will be found that at some periods a greater number has died of the Small-pox within twelve months; but that, in 1796, the proportion of deaths from this complaint, to the whole annual mortality, has exceeded that of any preceding year. The only years in which the deaths, by the Small-pox, amounted to more than 3000, were the following:

Total of Deaths.	By the Small-pox.		
In 1725, 25,523....	3188, or	125 in	1000.
1736, 27,581....	3014,	100	ditto.
1752, 20,485....	3538,	172	ditto.
1757, 21,213....	3296,	154	ditto.
1763, 26,143....	3582,	137	ditto.
1768, 25,639....	3028,	128	ditto.
1772, 26,053....	3992,	153	ditto.
1796, 19,288....	3548,	183	ditto.

From the report published by the committee of the Small-pox and Inoculation Hospitals, it appears, that of those who take the disease casually, the mortality is in the proportion of one to six. It must be added, as a proof of the advantages of inoculation, that not more than one patient out of four or five hundred dies of the inoculated Small-pox. The number of patients admitted into the Small-pox Hospital, from the 26th of September 1746, to the 1st of January 1796, has been 19,202: the number of patients inoculated within the same period, 29,890. During last year, 1506 were inoculated at the hospital, and only three out of that number died there. The number of patients admitted in the natural Small-pox was 480. As the hospitals are situated without the Bills of Mortality, their own register alone records the deaths which happen there, and which are according to the average above stated, or somewhat more, the cases admitted being generally of the most unfavourable kind.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of January to the 20th of February.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Catarrh	20	Small-pox	3
Peripneumony	3	Erysipelas	2
Pleurisy	1	Aphthous Sore-throat	4
Angina	3	Hooping Cough	3
Peritoneal Inflammation	2	Slow Fever	2
Acute Rheumatism	8	Child-bed and Milk Fevers	6
Malignant Fever	5	Acute Diseases of Infants	7
Scarlatina anginosa	3		
Measles	2		

CHRONIC DISEASES.

Cough and Dyspnœa	45	Hypochondriasis	3
Pulmonary Consumption,	9	Dropsy	4
Chronic Rheumatism	7	Scrophula	5
Spitting of blood	2	Chlorosis and Amenorrhœa	6
Hæmorrhagy from the nose	4	Abortion	2
Cephalæa	8	Pain of the side	3
Apoplexy	1	Dyspepsia	13
Hydrocephalus	3	Gastrodynia	7
Epilepsy	1	Enterodynia	3
Asthenia	15	Diarrhœa	6
Hysteria	3	Obstipatio	3
Paralysis	1	Bilious vomiting	2
Syncope	1	Hæmorrhoids	2

Fluor albus	3	Prurigo	2
Scirrhus uteri	1	Nettle-rash	2
Tabes mesenterica	4	Purpura	1
Worms	6	Herpes miliaris	1
Jaundice	1	Scabies	3
Gravel	1	Impetigo	1
Varices	1	Porrigo	2
Scaly Tetter	1		

In the present month, the weather has been considerably milder than during the preceding one. The series of diseases in each will, notwithstanding, be found very nearly to correspond. It is likewise observable, that whenever catarrhal, pneumonic, and other inflammatory diseases prevail extensively, the proportion of contagious complaints is much diminished.

One of the cases of peritoneal Inflammation, which had been neglected for ten days, terminated fatally. On examination of the parts affected after death, a large quantity of pus was found effused into the abdominal cavity; the bowels were glued together by a thick, inflammatory exudation, and many portions of them appeared black and contracted, but no gangrene had taken place: the colon was superficially ulcerated in several places.

Inflammation of the peritoneum and omen-

tum frequently occurs here, both in adults, and children, or even infants, and becomes fatal through improper treatment. Being attended with bilious vomiting, great depression of strength, and a small weak pulse, it is often mistaken for a colic, or enterodynia arising from flatulence, and a too irritable state of the alimentary canal: whence opiates, warm purgatives, aromatics, and spirituous cordials, are usually given. The consequences of this practice are always fatal. Not only the puriform effusion and exudation take place, but likewise extensive ulceration: sometimes the whole omentum is converted into a purulent mass, or wholly destroyed: in other cases, there are many circular gangrenous patches on the surface of the intestines. The complaint at an early period is easily relieved by the application of a number of leeches round the umbilicus; by pediluvium, fomentations, and gentle purgatives. Cupping-glasses cannot be applied on account of the tension and soreness of the abdomen. It may not be amiss to observe, that bleeding from the arm is much less effectual in relieving the pain and inflammation than the repeated use of leeches.

The Deaths stated in the Bills of Mortality for the last four weeks are as follow:

Small-pox	67	Apoplexy and Palsy	25
Measles	14	Hydrocephalus	2
Scarlet Fever	1	Pulmonary complaints,	510
Erysipelas	1	Rheumatism and Gout,	11
Hooping Cough	42	Dropsy	51
Fevers	132	Cancer	2
Diseases of Infants	41	Inflammation & Ulcers,	32
Puerperal cases	19	Rupture	5

The number of deaths referred to pulmonary Consumption seems enormous. I shall endeavour at some future period to ascertain, by a correct mode of investigation, whether this article in the Bills of Mortality be consistent with truth.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of February to the 20th of March.

List of the cases which occurred in my own Practice.

ACUTE DISEASES.

Catarrh	48	Acute Rheumatism	5
Pleurisy	2	Small-pox	4
Hæmoptoë	3	Measles	2
Angina	2	Scarlatina anginosa	2

Erysipelas	2	Puerperal Fever	4
Malignant Fever	2	Acute Diseases of Infants,	9
Slow Fever	1		

CHRONIC DISEASES.

Cough and Dyspnœa	74	Intestinal hæmorrhagy	2
Phthisis Pulmonalis	14	Menorrhagia	3
Pleurodyne	2	Fluor albus	2
Chronic Rheumatism	11	Chlorosis and Amenorrhœa	6
Lumbago	2	Scrophula	4
Asthenia	10	Tabes mesenterica	2
Dropsy	5	Worms	3
Hypochondriasis	2	Scirrhous liver	1
Cephalæa	5	Jaundice	2
Hysteria	1	Hernia	2
Epilepsy	2	Prolapsus uteri	1
Hydrocephalus	1	Tooth-ache	3
Gastrodynia	15	Scaly Tetter	2
Dyspepsia	7	Herpes	1
Enterodynia	5	Itch and Prurigo	5
Diarrhœa	7	Lupus	1
Constipatio	2		

Nearly one half of the cases in the above list are diseases of the lungs, occasioned by the sharp and intensely cold north-east winds, which have prevailed during the month. The symptoms of the epidemic Catarrh were, head-ache, sometimes attended with vertigo; a thin, acrimonious discharge from the nostrils; slight inflammation of the throat; a sense of constriction in the chest, with a

frequent dry cough; pains in the limbs; a white tongue; a quick and small pulse; with a sensation of languor, and general debility. This disorder continued about eight days; and then terminated with gentle perspirations, or in some instances by a diarrhœa. It has been, by many practitioners, denominated an Influenza, but, I think, not with strict propriety, the complaint being merely epidemical from a particular state of the atmosphere, and not propagated by contagion. Coughs have been remarkably severe and obstinate: they were frequently attended with painful stitches, and spitting of blood. Several persons, not previously much indisposed, were seized on a sudden with a violent cough and great difficulty of breathing: the countenance presently became livid and bloated; the pulse weak and fluttering; and they expired in a very short time. I recollect many similar instances of sudden death, after exposure to cold, during the severe winter in the year 1794-5.

One of the cases of Scarlatina anginosa, which appeared slight in the first stage, began to assume the malignant form of that disease on the fifth day, as soon as the eruption declined. The patient was a girl about three

years old, who had been previously in a good state of health. At the time mentioned, she became comatose: the eyes were dull and glassy; the pulse usually 144, or upwards: her throat, tongue, and palate, were covered with aphthæ: a large quantity of phlegm collected in the fauces, and produced a rattling in the breath; her cheeks were flushed and tumid: whenever she was roused from her slumber, she was extremely irritable and fretful; but soon after returned to a state of torpor and insensibility. On the eighth day, the right cheek and eye-lids were affected with an erysipelatous tumour, which presently closed the eye. On the ninth, a considerable discharge began to take place, from the eyes and nostrils, of a thin acrimonious fluid, producing excoriation, which was much increased by the little patient's constantly rubbing or picking the nose and lips. As soon as this discharge appeared, the secretion of the phlegm in the throat ceased, and with it the disagreeable rattling in expiration and inspiration. On the twelfth day, the forearms were again covered with the scarlet eruption; and patches of it likewise appeared about the loins and nates. The rash declined in two or three days, but without any allevia-

tion of the coma, or other febrile symptoms. There was indeed no material alteration till the eighteenth day of the disease, when the erysipelatous tumour began to subside, and its surface to desquamate, so that the eye could be opened. The pulse, at this time, returned to its usual standard; the tongue became soft and moist, though ulcerated in several places; the dozing and insensibility were removed; the child was able to sit up, and sought for amusement. On the twentieth day there was a return of the swelling in the under eye-lid; but no other morbid symptom remained excepting debility and great fretfulness.

This child, being the daughter of an eminent and amiable physician, was well nursed, and attended with anxious care, otherwise its chance of recovery had been but small; there being few instances of escape from a disorder so virulent.

The Deaths reported during the last four weeks in the Bills of Mortality are as follow:

Asthma and Consumption	578	Scarlet Fever	1
Hooping Cough	41	Measles	7
Fevers	134	Puerperal Fever	24
Small-pox	32	Croup	1
		Convulsions	307

Teething and Thrush	51	Inflammation and Mortification	57
Water in the head	5	Cancer	20
Apoplexy and Palsy	28	Gravel	2
Lunatic	10	Gout	14
Jaundice	4	From Old Age	186
Dropsy	81		
Fistula	12		

ACCOUNT OF DISEASES IN LONDON,

From the 20th of March to the 20th of April.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Catarrh	16	Acute Rheumatism	4
Peripneumony	2	Gout	2
Hæmoptoë	6	Scarlatina anginosa	4
Epistaxis	2	Measles	2
Angina	4	Small-pox	3
Otalgia	1	Hooping Cough	3
Ophthalmia	2	Malignant Fever	2
Peritoneal Inflammation,	3	Slow Fever	3
Enteritis	1	Puerperal Fever	2
Phlegmone Testis	1	Acute Diseases of Infants,	9

CHRONIC DISEASES.

Cough and Dyspnœa	37	Nephralgia	4
Phthisis Pulmonalis	12	Pleurodyne	2
Chronic Rheumatism	6	Asthenia	13
Sciatica	2	Hysteria	2

Epilepsy	2	Menorrhagia	4
Paralysis	3	Chlorosis and Amenorrhœa	8
Cephalæa	2	Fluor albus	3
Apoplexy	1	Scirrhous ovarium	1
Dyspepsia	12	Scirrhous liver	1
Gastrodynia	4	Anasarca	4
Enterodynia	6	Hydrothorax	3
Diarrhœa	5	Rickets	2
Obstipatio	1	Scrophula	5
Colica Pictonum	2	Porrigo	3
Hæmorrhoids	3	Itch	5
Hernia	2	Ecthyma	1
Worms	3	Purpura	1
Dysury	2		

PERIODICAL DISEASES.

Tertian	1	Hectica adolescentium	2

The number of catarrhal complaints has been considerably diminished within the present month: inflammatory diseases, however, appear, on the whole, to have been most predominant. One of the cases of Peripneumony terminated fatally; the patient, a female, having been bled largely, and repeatedly. The Measles and the Hooping-cough are not very frequent at the west end of the town; but, as I understand, prevail much in the city, more especially the latter disease: forty-four children have died of it, between the 21st of March and the 18th of April,

according to the report in the Bills of Mortality.

One of the three cases of Scarlatina anginosa proved fatal: the patient was a delicate boy, about four years of age, who struggled with the complaint till the 19th day, and then expired suddenly.—In the case of this disease given last month, a considerable quantity of matter formed in the swelling of the under eye-lid, which was discharged by an opening, made on the 24th day from the beginning of the fever: the abscess healed in a short time; and the child has since been gradually regaining her health and strength.

After the abatement of the epidemic Catarrh, a violent disease fell upon cats, by which many hundreds of those domestic animals perished. The particular symptoms of their malady, I had not a sufficient opportunity of ascertaining: but, from dissections, it appeared, that the bowels had been drawn together by a violent cramp, or spasmodic constriction, involving likewise the omentum, and preventing any passage. In some, the intestines were partially red, or blackish: but, in the greater number of instances, the contraction and extraordinary twisting of the

bowels had taken place without any marks of inflammation.

Between the 21st of March and the 18th of April, the Bills of Mortality report 1500 deaths; 29 by the Small-pox; 526 of infants and children under five years of age; 502 from Asthma and Consumption. I formerly noticed the large proportion of deaths stated in the Bills of Mortality as arising from pulmonary complaints*; and proposed to ap-

* Dr. Fothergill was of opinion that the number of deaths from Consumption was greatly over-rated in the Bills of Mortality; he remarks, on this subject, "Foreigners, who are ignorant in what manner our Bills are compiled, give it out that Consumption is the grand endemic of England.—The searchers are commonly two as poor and ignorant persons as the parish affords; these are to see all dead bodies, and to report to the Company of Parish-clerks of what disease they died: if the body is emaciated, which may happen even from an acute fever, it is enough for them to place it to the account of Consumption, though the death of the party was perhaps owing to a disease specifically different; and thus a monstrous account is framed by the ignorance of the searchers, to the disgrace of our country, and even so far as to discourage some foreigners from coming among us."—Observations on the Weather and Diseases, Dec. 1751.

Dr. W. Heberden, however, justly observes, that "the agreement of the Bills with each other, does alone carry

ply some test, in order to ascertain the correctness of this article. The only one I have

with it a strong proof, that the numbers under the several articles are by no means set down at random, but must be taken from the uniform operation of some permanent cause. While the gradual changes they exhibit in particular diseases correspond to the alterations which, in time, are known to take place in the channels through which the great stream of mortality is constantly flowing."—Observations on the Increase and Decrease of different Diseases, Preface.

Dr. Heberden (page 42) computes the fatality from Consumption to have been, at the beginning, middle, and end of the last century, in the following ratio:

Beginning.	Middle.	End.
3000.	4000.	5000.

Great as is the mortality from this source in the metropolis, it is scarcely less extensive, according to Dr. Woollcombe, in Devonshire and some other parts of the country. Consumption, in his opinion, is progressively extending its ravages; and he estimates the number of its victims, in Great Britain alone, to be not less than fifty-five thousand annually.—See his Remarks on the Frequency and Fatality of different Diseases, pp. 47, 59, 73.

No certain security from the attack of this insidious and destructive complaint appears to be afforded by a more uniform temperature, and greater purity of the atmosphere: Dr. Gourlay, speaking of Madeira, says, "It is not to be concealed, that no malady is more prevalent here than

to offer is the result of my own experience, by exhibiting a fair and exact account of all the fatal cases which have occurred during the last two years.—However uncomfortable such a review may be to a physician, I have for once ventured to make it; and the following statement may be depended upon as precisely correct.—Out of 4500 persons admitted under my care, in the years 1795 and 1796, 245 died from the following disorders:

Pulmonary Consumption	77	Ulcerated malignant Sore-throat	3
Hæmorrhagy from the Lungs	5	Peritoneal Inflammation	2
Peripneumony	1	Inflammation of the bowels, and Hernia	4
Hooping-cough	3	Dysentery	1
Cough succeeding the Measles	6	Ulcer of the Rectum	1
Small-pox	20	Psoas Abscess	1
Scarlatina anginosa	2	Gangrenous Ulcer	1
Malignant Fever	8	Tetanus, with locked jaw,	2
Slow Fever	3	Acute Diseases of Infants uuder two years of age,	14
Summer Fever	1	Hydrocephalus	7
Puerperal Fever	2		

Phthisis, with the natives of the island. Persons of all ages, and of both sexes, fall victims to it; nay, whole families have at times been suddenly swept away by it."—Observations on the Natural History, Climate, and Diseases of Madeira, page 91.—A. S.

Scrophula, Rickets, and Tabes mesenterica	10
Scirrhus and Cancer uteri	3
Cancer of the breast	3
Gradual decline, mostly with scirrhous liver and Dropsy	21
Decay from old age	7
Jaundice	1
Stone	1
Stoppage of the bowels	2
Disorder of the Stomach and Bowels, from excess in drinking Spirits	14
Apoplexy	6
Paralysis	8
Obstinate Head-ache	1
Menorrhagia	3
Abortion	1

In the above account, the deaths from pulmonary complaints, exclusive of the Hooping-cough and Measles, amount to one-third of the whole mortality; which affords a proof, that the proportion stated in the Bills of Mortality is not over-rated. That proportion, during the winter months, will be found to vary from one-third to one-half. In the general Bill for the year 1796, if we exclude executions, other violent deaths, and abortive or still-born infants, the number of deaths is reduced to 17,648; of which 5264 are referred to pulmonary diseases. This proportion will not differ much from that stated as the result of my own experience, allowance being made for the extraordinary fatality of the Small-pox, in many parts of the city, during the year 1796. If the

deaths by the Small-pox, and of Infants under two years of age, be deducted from the sum total, the proportional mortality from pulmonary complaints, to that of all other diseases, is as 5264 to 8680, or as 1 to $1\frac{5}{8}$ nearly.

It must therefore be allowed that diseases of the lungs are more fatal in this place than any other species of disease; which is partly referable to the variable state of our climate; but perhaps not less to our modes of living, and to the little attention paid in adapting the dress to the change of seasons.

In my own list, the article of pulmonary Consumption includes cases of ulcerations of the lungs, and alteration of their texture, in consequence of pneumonic Inflammation and repeated Catarrhs. I apprehend not more than a fourth part of the whole number of cases put down could be referred to proper Phthisis, arising from the slow and successive suppurations of tubercles in strumous constitutions.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of April to the 20th of May.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Catarrh	8	Scarlatina anginosa	6
Peripneumony	2	Small-pox	3
Angina	2	Measles	1
Ophthalmia	2	Aphthous Sore-throat	2
Hæmoptoë	4	Hooping Cough	2
Acute Rheumatism	4	Slow Fever	3
Gout	2	Puerperal Fever	2
Malignant Fever	4	Acute Diseases of Infants	6

CHRONIC DISEASES.

Cough and Dyspnœa	23	Gastrodynia	6
Phthisis pulmonalis	10	Enterodynia	8
Chronic Rheumatism	11	Diarrhœa	7
Asthenia	15	Constipatio	2
Dropsy	7	Hæmatemesis	1
Hysteria	3	Hæmorrhoids	3
Epilepsy	1	Worms	4
Syncope	2	Chlorosis and Amenorrhœa	12
Apoplexy	1	Fluor albus	6
Paralysis	3	Menorrhagia	3
Dyspepsia	14		

Prolapsus uteri	1	Tabes	4
Scirrhus uteri	1	Purpura	1
Gravel and Dysury	3	Itch	3
Scirrhous liver	4	Scald-head	2
Jaundice	3	Inflamed Pustules	2
Scrophula	4	Noli me tangere	1

PERIODICAL DISEASES.

Tertian	1	Hectica senilis	4
Hemicranium	3		

The warm and mild weather, which commenced on the 12th of May, put a stop to the pneumonic and catarrhal complaints, so prevalent during the two preceding months. Since the beginning of May, the Scarlatina anginosa has become more frequent than any other contagious disease, both in town and in many parts of the country: the disease has generally occurred in its malignant and fatal form, which, at this season of the year, is very unusual. However, the method of treatment formerly recommended (see page 148) has been uniformly successful, in the cases presented to my own observation.

The other Acute Diseases having afforded nothing worthy of particular notice, I shall at present offer a few remarks on the chronic

Purpura, a title which has often appeared in the foregoing monthly lists of diseases, and which was intended to express the complaint better known under the appellation of Petechiæ sine febre. A slight degree of this complaint often takes place in women and children, who live on a poor diet, and use little exercise. Without any considerable sensation of illness, an eruption of dark red spots appears in the skin of the legs, arms, breasts, and abdomen. These spots are precisely the same as the Petechiæ in malignant Fevers; and, with regard to size, colour, &c. very much resemble flea-bites, only being without the central point made by the sting of the insect. On the legs, however, they are usually somewhat larger, and often become confluent in irregular patches. The only disorder attending the eruption is a sensation of general weakness and languor, without any febrile symptoms; and a cure is readily performed by the application of proper diet and a sufficient degree of exercise. Another form of the disease, which may be entitled Purpura hæmorrhagica, is much more violent and dangerous. For some weeks previous to the appearance of purple spots, the patient complains of an oppressive

sensation of languor, weariness, faintness, and a gnawing pain at the stomach. Sometimes the eruption is more immediately preceded by shiverings, nausea, bilious vomitings, and acute pains of the limbs referred to the bones. The spots appear first on the legs; and afterwards, without any certain order, on the thighs, arms, and trunk of the body. Their primary colour is a bright red, but this, within a day or two, changes to a purple or livid hue. They are considerably larger than the spots of the Purpura simplex, but, like them, are always nearly of a circular form. Sometimes they are few and distinct, sometimes numerous and coherent; they are sometimes distributed uniformly over the surface of the body, sometimes in irregular clusters. In many cases, they are interspersed with vibices, or livid patches, resembling the effects of a bruise.

The hæmorrhagy, which always attends this kind of eruption, is at first very profuse; and, however it may be checked, returns frequently; in some instances, every day at a stated hour: it takes place from the nostrils, throat, and mouth; often from the lungs, stomach, or intestines; also from the uterus, even at an advanced period of life. A soft-

ness and swelling of the gums is not a constant appearance in the hæmorrhagic Purpura; when blood is discharged from the mouth, it seems to spring from abrasions on the inside of the cheeks, on the tongue, or tonsils; all which surfaces are occasionally covered with purple spots.

This disease has no regular or stated termination; it has been protracted in the different cases which I have seen, from three weeks to twelve months or upwards. In none of those cases did the disease prove fatal: it appears, however, from the account of medical authors, that the hæmorrhagy has, on some occasions, been so violent as to produce almost immediate death*. When the disease has continued some length of time, anasarcous swellings and gangrenous ulcers of the extremities usually succeed.

The exciting causes of the hæmorrhagic Purpura seem to be, poor diet, a sedentary mode of life, watching, and anxiety of mind. Hence it affects women in a much larger proportion than men. The complaint, however, is, in this place, very frequent among

* See the cases in the Acta Natur. Curiosor. & Listeri Exercitat. de Scorbuto.

children who live well, and are under no particular restraint. In such cases, I apprehend it must be referred to the impure air of a large city, and to the want of the salubrious exhalations from growing vegetables. As a proof of this position, it may be mentioned, that children affected with the disease, on whom the usual remedies have been applied with little success, are presently cured, after being removed into the country.

The mode of treatment* for this disease is

* Dr. Bateman questions the propriety of the directions here given for the treatment of Purpura; and it must certainly be allowed, that they are too general. Dr. B.'s observations on this subject, in his Synopsis of Cutaneous Diseases, (pp. 107-116,) deserve attention; but his unqualified praise, in a later work, of an opposite mode of practice, is to be regretted. He says, (Reports on the Diseases of London, page 131,) "It (Purpura) is obviously a disease of congestion, and not of putrescency or mere debility; and evacuants, and not bark and other tonics, constitute the successful treatment." The method of bleeding and purging, in Purpura, which prevailed among some of the older practitioners, (See Lister's Exercit. Medic. pp. 94, 96, 100,) has been revived by some eminent physicians of the present day; and there can be no doubt of its propriety when employed in stout, plethoric habits, under circumstances indicating an inflammatory diathesis, or visceral congestion. But we ought surely to abstain from the use of the lancet, and of 'active purgatives,' in cases marked by extreme debility and inanition,

simple, and may be comprised in a very few words. It is proper to recommend a generous diet, the use of wine, Peruvian bark, and acids, along with moderate exercise in the open air, and whatever may tend to produce cheerfulness or serenity of mind.

and owing their origin to "a sedentary mode of life, poor diet, impure air, and anxiety of mind," which, at least in the metropolis, are, as Dr. Willan assures us, (On Cutaneous Diseases, page 460,) "the usual exciting causes of this disease." In the course of twenty-six years practice, seventeen instances of Purpura came under his notice, of which, "two only were men; nine were women; three, boys; and three, infants, not more than a year old." Of these, he adds, "Several of the female patients were confined to laborious work, in close situations. One patient, aged 46, who, with the purple eruption, had weekly returns of menorrhagia, was the principal teacher in a crowded school. A young woman, aged 19, and a boy about 12 years old, whose gums and tonsils were livid, spongy, and tender, and whose skin exhibited numerous petechiæ mixed with vibices, had lived for a number of years almost constantly on tea and coarse bread. An infant at the breast, aged six months, was similarly affected, the mother not being able to procure sufficient nourishment. One of the men referred his complaint to excessive fatigue in sultry weather, and to the want of proper food." (loc. cit.) It will, I apprehend, be admitted, that, in the treatment of cases similar to those above-mentioned, "a generous diet, the use of wine, Peruvian bark, and acids," will constitute a more efficient and rational mode of practice, than the employment of "evacuants."—A. S.

Cases of the Purpura, or Petechiæ sine febre, have of late been multiplied in periodical publications relating to medicine, as if the disease were new or extraordinary. It must, undoubtedly, be considered as a branch of the true Scurvy, and, as such, it has been properly noticed by the writers on that subject two hundred years ago. It was not unknown to the antients; for Hippocrates himself has described the eruption, and mentioned some of the circumstances which usually attend it; see his Prænot. Coac. sect. 2. Actuarius has also shewn his acquaintance with this disease, and theorizes upon it, according to the notions of his own time. De Meth. Med. lib. i. cap. 23.

Cases of the Purpura are related by Amatus Lusitanus*, Eugalenus†, Horstius‡, Pezoldus§, Lister‖, Hoffman¶, Behren**,

* De morbo Pulicari sine febre; Curat. Med. 70. Cent. 3, anno 1550.

† De Scorbuto. See obs. 2. 33. 59. 62. 68. 69. 72.

‡ Obs. 17. lib. 5.

§ Obs. Ch. Select. 6.

‖ Exerc. de Scorbuto, anno 1680; see cases 1. 5. 6. 7. 8. 10. 11. 12.

¶ De Purp. Scorb. tom. iv. and Supplem. Part I. and II.

** De Affect. a Mitylis.

Werlhoff*, and by different writers in the Acta Naturæ Curiosorum†. In the ninth volume of this work, there is a complete history of this disease, under the denomination of Petechiæ mendaces. General observations upon it have also been made by Riverius‡, Sydenham, Cusson §, Sauvages||, Burserius¶, Strack **, and many other respectable authors, to which scarcely any thing of importance can now be added.

* De Variol. & Anthrac. cap. iii. § 15.

† Tom. i. obs. 35 & 79.—Tom. iii. 79.—Tom. iv. p. 468.—Tom. v. obs. 30.—Tom. vii. obs. 110. 131. &c. &c.—Compare Phil. Trans. vol. liii.—Commerc. Literar. Norimberg, 1735. Hebd. 2. and 7.—Acta Hafnens. vol. ii.—Dr. Duncan's Medical Cases, and Med. Comment.—Medical Facts, vol. ii. and a case by Dr. Aikin, in the Mem. of the Medical Society of London, vol. iii.

‡ Prac. Med. l. xvii. cap. 1. and obs. 18. Cent. 2. obs. 21. Cent. 1.

§ De Purpura sine febre.

|| De Phænigmo Petechiali.

¶ Instit. Med. vol. ii. 10.

** Obs. Med. de Morbo cum Petechiis.

The Bills of Mortality, from the 18th of April to the 16th of May, report 1341 deaths: from

Ague	2	Lunatic	10
Apoplexy	14	Inflammation, Abscess, and Mortification	42
Asthma and Consumption	466	Old age	111
Cancer	8	Palsy	6
Convulsions	395	Piles	1
Croup	1	Pleurisy	1
Dropsy	67	Puerperal cases	19
Fever	119	Rupture	2
Gout	12	Scarlet Fever	1
Hæmorrhagy	1	Small-pox	20
Head-ache	2	Still-born and Abortive,	45
Hooping Cough	23	Stone	1
Jaundice	6	Teeth	34
Jaw locked	1	Thrush	2
Lues Venerea	4	Water in the head	6

From this statement it will appear, that more than one-third of the deaths were produced by pulmonic diseases. Of infants, under two years of age, three hundred and eighty-three (above one-fourth of the whole number) have died within the time above specified. As only one hundred and twenty or thirty cases are referred, by the Bills, to diseases peculiar to infants, abortive births being included, the remaining number (about two hundred and sixty) must be made up

from the indefinite articles of Fever and Convulsions.

Lastly, it may be remarked, that one hundred and twenty-two persons died between the ages of seventy and ninety.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of May to the 20th of June.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Measles	10	Pleurisy	1
Scarlatina anginosa	6	Inflammation of the bowels	1
Small-pox	9	Peritoneal Inflammation.	1
Swine-pox	2	Summer Fever.	1
Malignant Fever	3	Aphthous Sore-throat	2
Catarrh	6	Herpetic Sore-throat	1
Acute Rheumatism	3	Puerperal Fever	1
Gout	2	Acute Diseases of Infants	6
Otalgia	1		

CHRONIC DISEASES.

Asthenia	24	Cephalæa	3
Hysteria	3	Apoplexy	1
Syncope	2	Paralysis	2
Epilepsy	1	Dropsy	6

Chronic Rheumatism	5	Worms	3
Cough and Dyspnœa	15	Gravel and Dysury	4
Spitting of blood	4	Hæmorrhoids	2
Pulmonary Consumption,	8	Scirrhous liver	1
Pleurodyne	3	Scrophula	6
Dyspepsia	12	Tabes	5
Gastrodynia	4	Herpes zoster (Shingles),	2
Enterodynia	3	Herpetic Ringworm	3
Diarrhœa	3	Scaly Tetter	1
Chlorosis	4	Porrigo	2
Fluor albus	4	Itch	3
Menorrhagia	2	Morbus Pedicularis	1
Prolapsus uteri	1		

PERIODICAL DISEASES.

Tertian	1	Hectica adolescentium	2
Hectica senilis	5	Hemicranium	1

The cold and wet weather in the month of May protracted the duration of inflammatory diseases, and made an unfavourable season for the Measles, Scarlatina, &c. In a girl about nine years old, the eruption of the Measles was suddenly repelled, soon after its appearance, by exposure to cold. A most violent fever ensued: the pulse became quick, small, and irregular; the tongue was moist, though furred; the eyes dull and heavy; the skin pale and livid; the extremities generally cold: she had a slight cough: her breathing was laborious, and attended with a rattling

in the throat, owing to an increased secretion of phlegm from the lungs. She was usually comatose; but, when disturbed, extremely querulous and fretful. She drank only milk and water, and took no other food, nor any medicines. The above symptoms continued, without much variation, for four days; and she died on the ninth day of the disease.

Since the commencement of warm weather, in the month of June, both the Measles and Scarlatina have appeared in their mildest forms. In two cases of Measles, the eruption was not attended with the least catarrhal complaint, nor with any febrile symptom, excepting a slight fur on the tongue.

The species of Sore-throat, termed Angina herpetica, has not been noticed by medical writers. It is preceded by violent shiverings, head-ache, pain of the stomach, nausea, aching pains in the limbs, a quick pulse, flushing of the cheeks, restlessness, and great heat of the skin during the night. A day or two after the commencement of these symptoms, there is felt a disagreeable roughness in the throat, with a difficulty and pain in swallowing. On the third day, little watery vesicles arise on the uvula, tonsils, &c. and are attended with a sensation of soreness or

pricking. On the fourth and fifth day, clusters of herpetic pustules appear about the mouth, and sometimes on the red part of the lip. On the sixth and seventh day, the fluid in the pustules turns yellowish, the internal vesicles break, and the fever subsides. On the eighth and ninth, the slight ulcerations in the throat are healed; and the circular blotches about the lips are covered with slight scabs, which soon fall off; and the patient experiences no farther uneasiness.

The Deaths in the Bills of Mortality, from the 23d of May to the 20th of June, are stated as follows:

Asthma and Consumption	344	Jaundice	2
Apoplexy and suddenly	15	Inflammation and Abscess	20
Aged	92	Lunatic	3
Abortive and Still-born	51	Measles	22
Convulsions	258	Mortification	13
Child-bed	13	Palsy	6
Cancer	4	Pleurisy	3
Dropsy	53	Small-pox	37
Fever	105	Sore-throat	1
Gout	7	Teeth	15
Gravel	1	Thrush	3
Hooping-cough	15	Water in the head	7

Out of this number, three hundred and eighteen died under two years of age, twenty-

six between eighty and ninety, and one person between ninety and a hundred.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of June to the 20th of July.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Measles	13	Pneumonic Inflammation	1
Scarlatina anginosa	4	Peritoneal Inflammation.	1
Small-pox	3	Acute Rheumatism	3
Swine-pox	3	Malignant Fever	4
Erysipelas of the face	1	Summer Fever	2
Aphthous Sore-throat	5	Slow Fever	3
Inflamed Sore-throat	3	Puerperal Fever	2
Hooping-cough	3	Acute Diseases of Infants	7
Catarrh	4		

CHRONIC DISEASES.

Asthenia	29	Hæmorrhagy from the lungs	4
Syncope and Hysteria	5	Hæmorrhagy from the stomach	1
St. Vitus's Dance	1	Bilious vomiting	4
Epilepsy	2	Dyspepsia	10
Cephalæa	6	Gastrodynia	8
Apoplexy	3	Enterodynia	3
Cough and Dyspnœa	10		
Pulmonary Consumption	5		

Diarrhœa	9	Hæmorrhoids	3
Fluor albus	4	Hernia	1
Menorrhagia	2	Scald-head	4
Chlorosis and Amenorrhœa	5	Itch and Prurigo	6
Dropsy	8	Tooth-rash	4
Chronic Rheumatism	9	Boils	3
Lumbago and Sciatica	5	Scaly Tetter	2
Scrophula	6	Gutta Rosea	2
Jaundice	1	Noli me tangere	1
Gravel and Dysury	3	Erythema	2
Worms	4	Purpura	1
		Chronic Nettle-rash	2

PERIODICAL DISEASES.

Tertian	1	Hectica senilis	3
Hemicranium	1		

It is observed by Sydenham, that the Measles, when epidemical, usually commence in January or February, and are rapidly diffused till the vernal equinox; that the morbillous constitution is then at its acme, and afterwards gradually declines till Midsummer, becoming extinct in the month of July. Having, however, paid attention to the subject for many years past, I am thence enabled to say, there is no such regularity in the commencement, progress, and decline of this disease. It has often been epidemical during the months of November and December, has nearly ceased in the spring season, and has

been again extensively diffused after Midsummer.

Experience, likewise, affords sufficient reason to controvert the truth of a position made by several medical authors, that epidemical contagious diseases succeed each other in a certain order or series; some of them predominating for a season to the exclusion of the rest. On the contrary, it is in general found, that the Small-pox, Measles, Scarlet Fever, and Hooping Cough, become epidemical about the same time, and continue their progress, though not always in equal degrees or proportions. This has been uniformly the case in London, according to my own observations, for many successive years.

The part of the year which, in this climate, most favours the propagation of contagious diseases, is the autumnal season and the beginning of winter; or the time between the end of August and the middle of December. The progress of malignant Fevers, of the Small-pox, and Scarlatina anginosa, is checked by the first frost in December; but the Measles and Hooping Cough sometimes continue their course through the winter, without much abatement.

In two cases of Measles, within the present month, a circumstance occurred which merits attention. The previous fever and the catarrhal symptoms having been moderate, or rather slight, the eruption took place in the usual form on the fourth day, and was distributed over the face, breast, and arms. It disappeared two or three days afterward, and no complaint seemed to remain. In the succeeding night, however, a violent fever commenced, and in the morning a fresh eruption appeared, which was diffused nearly over the whole body. This second stage of the disorder was attended throughout with much fever, with inflammation of the eyes, a constant troublesome cough, and a diarrhœa. The eruption went off, along with the fever, in four days: the cough and diarrhœa continued some time longer. Thus the whole duration of the disease was twelve days, eight of which were occupied by the two eruptions. Both the above patients were confined, after the first appearance of the rash, to their bedchambers, in which an uniform temperature was preserved; so that the renewal of the disease could not be caused by any check given to it in the first stage from exposure to

cold. A double fever and two successive eruptions* I never before remarked in the Measles, nor is it mentioned by practical writers. These circumstances are, however, not unusual in the Small-pox: the only difference is, that, in the Small-pox, there is an interval of eight days between the two eruptions. The first eruption always consists of large distinct pocks, without fever; in the second, the pustules are small and coherent, or sometimes confluent.

In one case of the malignant Fever, which was attended with coma, a weak and very quick pulse, and a black incrustation of the tongue and teeth, there appeared on the extremities large spots of a dark red colour, intermixed with petechiæ; and, about the fourth day, considerable vesicles, filled with a blackish lymph. On the fifth day, the tongue was dry and rigid; the jaw became likewise constricted and immovable, so that

* In a subsequent publication, the author, referring to these cases, observes, "I have since seen others of the same kind, wherein the efflorescence, without fever or catarrhal symptoms, having declined, there appeared on the fourth day from its commencement, a new efflorescence, and violent disorder of the constitution." On Cutaneous Diseases, page 236.—A. S.

no liquid could be passed into the mouth. In this dreadful situation, the patient, a delicate young lady, seventeen years of age, expired on the sixth day of the disease.

The following List of Deaths is given in the Bills of Mortality for the last four Weeks.

Apoplexy and suddenly.	9	Inflammation and Abscess	23
Asthma and Consumption	340	Jaw locked	1
Aged	74	Lunatic	6
Abortive and Still-born.	52	Measles	15
Brain-Fever	2	Mortification	15
Convulsions	220	Palsy	3
Croup	2	Small-pox	21
Child-bed	17	Sore-throat	1
Cancer	4	St. Anthony's Fire	1
Dropsy	61	Teeth	24
Fever	88	Thrush	4
Gout	5	Worms	1
Hooping-cough	20	Water in the head	3
Jaundice	4		

ACCOUNT OF DISEASES IN LONDON,

From the 20th of July to the 20th of August.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Acute Rheumatism	6	Contagious, malignant Fever	2
Gout	3	Measles	5
Catarrh	3	Scarlatina	2
Inflammatory Sore-throat	1	Miliaria æstiva	1
Aphthous Sore-throat	4	Small-pox	2
Mortification of the bowels	1	Chicken-pox	3
Intestinal Hæmorrhagy	1	Summer Fever	4
Hæmorrhagy from the lungs	6	Slow Fever	1
Puerperal Fever	1	Acute Diseases of Infants,	9

CHRONIC DISEASES.

Asthenia	34	Dyspepsia	10
Cough and Dyspnœa	18	Gastrodynia	9
Pulmonary Consumption	11	Enterodynia	4
Chronic Rheumatism	10	Bilious Vomiting and Diarrhœa	16
Sciatica	4	Menorrhagia	3
Paralysis	1	Fluor albus	7
Hysteria	3	Scirrhus uteri	1
Cephalæa	4	Scirrhous liver	1
Chlorosis	2		

Jaundice	2	Worms	2
Prolapsus ani	2	Cancer	1
Hernia	1	Impetigo	1
Prolapsus uteri	1	Lupus	1
Hæmorrhoids	3	Inflamed Pustules	3
Dysury and Gravel	3	Prurigo	2
Dropsy	7	Itch	3
Œdema puerperale	1	Scald-head	2
Scrophula	3	Scaly Tetter	2
Tabes mesenterica	4	Purpura	1

The frequent and sudden changes of the weather, during the last four weeks, have produced more cases of acute and chronic Rheumatism, of Catarrh, and other pulmonic diseases, than is usual for the present season. Violent disorders of the stomach and bowels, attended with bilious discharges, have also been very prevalent. The proper Cholera, as described by Sydenham, in general succeeds these complaints, not appearing till the end of August, or beginning of September. Contagious Fevers of all kinds seem to have abated considerably within the present month; at least, on the western side of the town.

The numerous cases of aphthous Sore-throat, put down in the list of diseases, for several months past, demand some attention. A slight account of this complaint was given

formerly*: but a more enlarged history of it may not be amiss, as it has a better right to be termed idiopathic than many other diseases, to which particular names have been assigned.

The aphthous Sore-throat usually begins with slight feverish symptoms, as head-ache, irregular shiverings, and pain in the limbs. Two or three days afterwards, a roughness and swelling are felt in the throat: upon inspection, the tongue appears of a dark-red colour, excepting that the middle part of it is covered with a thin whitish fur, above which, the points of the elongated papillæ are every where visible. On the tops of these, small ulcerations are formed along the upper surface and sides of the tongue; also on the uvula and tonsils, which are tumid, and much inflamed. In children, the ulcerations extend to the lips, palate, inside of the cheeks, and to the gums. The small specks of ulceration usually remain distinct, and heal in a few days; but are, from time to time, succeeded by others in the same, or in different situations. In some cases, however, these specks become confluent, and form, upon the palate

* See page 137.

and gums, within the fauces and cheeks, extensive patches of ulceration, covered with thick sloughs of a white or yellowish colour. There is seldom any disorder of the constitution attending this species of Sore-throat, beyond the first four or five days of its course; but the complaint in the mouth and fauces does not terminate in less than three weeks: it sometimes continues five or six weeks, or even longer, producing, however, no farther trouble than a slight sensation of roughness in the throat, with some difficulty in swallowing.

Men are often affected with the aphthous Sore-throat; but women and children are much more liable to it. Where there are many children in the same family, all of them have this disorder about the same time: in many instances I have observed a return of it in autumn, for several successive years.

The causes of this complaint seem to be, exposure to cold air, or drinking cold liquors, after being much heated by exercise; intemperance, or an unwholesome diet; and acrid effluvia taken into the lungs by respiration. Those who attend persons affected with Fevers, confluent Small-pox, or the Scarlatina anginosa, are very frequently affected with

aphthous ulcerations in the mouth and throat, as above described. The aphthous Sore-throat is likewise connected, on many occasions, with a miliary eruption over the surface of the body, which takes place in summer, along with a slight fever. (See page 231.)

This disease requires a light soft diet, and mild drinks, as whey, barley-water, toast-and-water, &c. with moderate exercise. The mineral acids, bark, and other medicines usually prescribed for it, have but little effect in shortening its duration.

Aphthous ulcerations occur symptomatically in a variety of diseases, both acute and chronic. They seldom fail to appear whenever the constitution has been weakened by old age, or long confinement from Dyspeptic and Gouty complaints, Diarrhœa, Chlorosis, and Phthisis pulmonalis, or other forms of Hectic in which the lungs are not particularly affected. Aphthæ also succeed the Measles, Scarlatina, Erysipelas, and Small-pox: in autumn, when the air is cold and moist, they occur in every case of malignant Fever, and almost universally affect women soon after child-bearing.

Ketelaer, who professes to give an enlarged account of the endemic Aphthæ in Zealand, has only described the symptomatic kind of them, which he thinks forms a crisis of Fevers. He refers their origin to some peculiarities of the diet, air, soil, and temperature of his country, supposing the complaint to be wholly unknown to other nations. Aphthous ulcerations, however, occur in this place, in a much greater variety of circumstances than has been mentioned by him: and prevail so extensively at certain seasons, that they are superadded to every acute disease. The same remark was often made by Dr. Huxham, during his long practice at Plymouth*. Aphthæ, thus occurring symptomatically, never produce any crisis or alleviation of the original fever, as Ketelaer, and most of the

* Julio, 1739. Diu duravit Angina quædam aphthosa quæ omnibus fere acutis morbis accedit, præcipue pustulosis; jamque etiam peripneumonicos vexat. Molestum sanè, et sæpe periculosum est symptoma, ubi in febribus membrana faucium inflammatur et pustulis obsidetur. *De Aere et Morb. Epidem. lib.* ii. *p.* 29.

Novembri, 1752, leves Anginæ innumeræ, etiam inter adultos; et ferè semper cum pustulis.—Vix sanè ulla Febricula occurrit, cujusvis generis sit, nisi pustulis aut aphthis consequentibus. *Compare Morton, de Febrib. p.* 74, &c.

physicians on the continent, have taught us to expect, but seem rather to aggravate the disease, and prolong its duration.

The London Bills of Mortality state the following number of deaths in different diseases, between the 18th of July and the 15th of August:

Asthma and Consumption	291	Jaundice	4
Aged	64	Inflammation and Abscess	32
Apoplexy and suddenly	16	Lethargy	1
Bleeding	2	Measles	15
Cancer	4	Mortification	20
Child-bed	14	Palsy	1
Convulsions	270	Rupture	2
Dropsy	50	Small-pox	35
Fever	106	Abortive and Still-born	43
Gout	8	Stone and Gravel	2
Head-ache	1	Teething	16
Hooping-cough	11	Water in the head	2
Head Mould-Shot	1		

Of the above number, 345 died under two years of age; 55 between seventy and eighty; 21 between eighty and ninety; and three between ninety and a hundred.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of August to the 20th of September.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Synochus, or Summer Fever	13	Peritoneal Inflammation	1
Cholera	6	Hæmoptoë	4
Chicken-pox and Swine-pox	5	Intestinal Hæmorrhagy	2
Small-pox	2	Mortification of the bowels	1
Scarlatina anginosa	3	Acute Rheumatism	2
Miliaria	2	Contagious malignant Fever	3
Aphthous Sore-throat	3	Child-bed and Milk Fevers	5
Erysipelas	3	Mammary Abscess	2
Hooping-cough	2	Acute Diseases of Infants	12
Peripneumony	2		

CHRONIC DISEASES.

Asthenia	30	Vertigo	3
Dropsy	6	Apoplexy	2
Chronic Rheumatism	10	Hysteria	3
Sciatica	1	Chlorosis	3
Cough and Dyspnœa	20	Gastrodynia	14
Cough succeeding the Measles	5	Enterodynia	13
Pleuritic Stitches	3	Bilious Vomiting and Diarrhœa	14
Pulmonary Consumption	8	Diarrhœa in Infants	7
Cephalæa	9	Devonshire Colic	1

Dyspepsia	10	Prurigo	3
Pyrosis	1	Phthiriasis	1
Diabetes	1	Scaly Tetter	3
Hæmorrhoids	2	Icthyosis	1
Menorrhagia	5	Chronic Nettle-rash	2
Fluor albus	3	Roseola	1
Dysury and Gravel	3	Shingles	1
Scirrhous kidney	1	Ringworm	1
Scirrhous liver	2	Impetigo	2
Jaundice	2	Scabies	3
Tabes mesenterica	4	Sycosis	1
Scrophula	6	Porrigo	2
Lichen	2		

PERIODICAL DISEASES.

Quotidian	1	Quartan	1
Tertian	2	Hectica	5

The above list contains a greater number and variety of complaints than has appeared in any foregoing account. At the present period of the year, indeed, a season so damp and unfavourable seldom occurs, there having been scarcely one day without rain for several weeks past. Cases of the Summer Fever and Cholera have been numerous and violent, but in no instance fatal, within my own knowledge. Many children, between one and two years of age, and even infants at the breast, were affected with the Summer Fever, in the months of July and August. The general symptoms of this fever are stated page 149.

Infants had a yellowish brown fur on the tongue, an extremely quick pulse, with flushing of the cheeks, and a great heat of the skin: they took little nourishment; and were, during the greatest part of the day, in a dozing, or comatose state. In the second or third week, there appeared a remission of the febrile symptoms for some hours in the day; but this was constantly succeeded by an exacerbation towards evening, and a considerable degree of fever through the night. The whole duration of the complaint was seldom less than a month.

The Varicella, or Chicken-pox, has been very prevalent during the summer. The eruption was generally preceded by a strong fever*;

* The Author has elsewhere stated (On Vaccine Inoculation, page 91), that he did not recollect to have seen any case of Varicella without some disorder of the constitution. He quotes, however, the observation of Dr. Heberden, that the eruption appears "in many, without any illness or previous sign;" and, also, the remark of Plenck, "Varicellæ ut plurimum sine notabili febre erumpunt."

Prof. Thomson is inclined to regard the Chicken-pox as a modified form of Small-pox. For a view of the arguments which have been adduced in favour of, and against this position, see a Paper in the Edinburgh Medical and Surgical Journal for October 1818, by Dr. Thomson; his History of the Varioloid Epidemic of Scotland; and a review of that work in the above-mentioned Journal for April 1820. —A. S.

and, in three cases, by a vivid universal rash, similar to that which often attends the eruption of the Small-pox. The variety of this disease, termed here the Swine-pox, is characterized by an eruption of vesicles, having nearly the size of peas, and filled with a transparent lymph. In both species, the periods and concomitant symptoms are the same; and both are produced by the same contagion.

The acute Miliaria, which occurs frequently in the summer months, has not, I believe, attracted the notice of any of our practical writers. Its primary symptoms are slight shiverings, with pains in the head and back: the pulse is small and quick; the tongue is covered with a white fur, but appears of a dark red colour at the edges; and its papillæ are considerably elongated. As the disease advances, the patients complain of a great heat and prickling in the skin, with sickness at the stomach; they are affected with an unusual languor and faintness, and have often profuse perspirations during the night. On the third, fourth, fifth, or sixth day of the disorder, a rash appears, sometimes in scattered patches, sometimes diffused over the whole body. It continues several

days in particular situations, as the neck, breast, stomach, and back; on other parts, it appears and disappears many times, without any certain order. The pustules, which, from their resemblance to millet-seeds, have suggested the name of Miliaria for this complaint, are distributed over the face and all the body; but are always most numerous on the breast and back, or where the rash is most vivid. They are round and very minute, and contain a white or pearl-coloured lymph. Their duration is but short: fresh ones, however, appear daily, so long as the rash and febrile symptoms continue. At the same time, small transparent vesicles are formed on the tongue, and often in the fauces: these usually terminate in aphthous ulcerations. (See page 225.) Neither the rash nor the pustular eruption afford any crisis or alleviation of the febrile complaint; but all of them are brought to a conclusion nearly at the same time; which is, in some cases, on the tenth day; in others, on the twelfth, fourteenth, or twentieth day of the disease.

Children, particularly boys, who use violent exercise in hot weather, and soon after expose themselves to a current of air, or drink cold water, are most liable to be affected with this

species of Miliaria: in adults it occurs very rarely.

This complaint may be much mitigated, and shortened in its duration, by a gentle emetic, or laxatives, administered at the beginning of it; and by afterwards taking freely of the diluted vitriolic acid, a cool regimen being at the same time observed.

The Account of Deaths in different Diseases, between the 15th of August and the 19th of September, given by the Bills of Mortality, is as follows:

Asthma and Consumption	360	Jaundice	4
Apoplexy and suddenly,	9	Inflammation and Abscess	37
Aged	55	Looseness and Gripes	3
Abortive and Still-born.	62	Lunatic	6
Convulsions	390	Measles	26
Child-bed	9	Mortification	25
Cancer	6	Palsy	12
Croup	4	Pleurisy	1
Dropsy	63	Rupture	2
Fever	119	Small-pox	28
Gout	8	Sore-throat	2
Stone and Gravel	5	Teeth	30
Hæmorrhagy	1	Thrush	3
Hooping Cough	28	Water in the Head	6

ACCOUNT OF DISEASES IN LONDON,

From the 20th of September to the 20th of October.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Malignant Fever	15	Inflammation of the bowels	1
Measles	5	Gout	2
Hooping-cough	3	Slow Fever	2
Small-pox	2	Child-bed and Milk Fevers	6
Catarrh	13	Acute Diseases of Infants	9
Peritoneal Inflammation	3		
Acute Rheumatism	3		

CHRONIC DISEASES.

Asthenia	21	Enterodynia	8
Hysteria	2	Diarrhœa	17
St. Vitus's Dance	1	Cholera	3
Chronic Rheumatism	6	Intestinal Hæmorrhagy	1
Sciatica	1	Hæmorrhoids	3
Dropsy	4	Chlorosis	8
Œdema puerperale	1	Menorrhagia	2
Cough and Dyspnœa	16	Dysury and Gravel	2
Pulmonary Consumption,	10	Scirrhus of the kidney	1
Spitting of blood	2	Scirrhus of the liver, and Jaundice	3
Hæmorrhagy from the nose	1	Scirrhus of the uterus	2
Head-ache and Vertigo	6	Cancer	2
Hydrocephalus	2	Gangrenous Ulcer	1
Apoplexy	1	Scrophula	5
Palsy	2	Rickets	2
Dyspepsia	15	Tabes mesenterica	3
Gastrodynia	12	Prolapsus ani	1

Red Gum and Tooth-rash,	5	Erythema	1
Lichen	1	Impetigo	4
Itch and Prurigo	6	Gutta rosea	1
Scaly Tetter	2	Porrigo	1
Purpura	1		

PERIODICAL DISEASES.

Quotidian	1	Hectica adolescentium	2
Tertian	2	Hectica senilis	3

The most extensive series of complaints, in the months of September and October, has consisted of Inflammations of the bowels, bilious vomitings, and diarrhœa, attended with violent pain, and in many cases with hæmorrhagy. These disorders of the bowels require early attention and nice discrimination. Some cases, if neglected at the beginning, or improperly managed, prove fatal within forty-eight hours. (See the Report for September 1799.)

The Measles, Scarlatina, Small-pox, and Hooping Cough, occur in various places, but have not been very widely diffused within the last two months.

It was observed in the last report, that cases of the Synochus, or Summer Fever, had been more frequent than usual in the months of August and September. They were succeeded, at the latter end of September, by a proportionate number of cases of the contagious malignant Fever, which, in

some instances, terminated fatally. A little girl, seven years of age, recovered from an apparently hopeless state of it. She, as well as her whole family, was greatly alarmed on the seventh or eighth night of the Fever by the repeated howlings of a strange dog * under her window. All the symptoms were immediately aggravated: she was affected with a diarrhœa, her pulse became very quick, her tongue was furred, and she was at times delirious. In the third week, her tongue became dry and brown, her eyes sunk and heavy; the excretions passed involuntarily; and she fell into a state of stupor, or rather of total insensibility. There was no distinct crisis of the Fever, but the little patient regained her faculties and strength very gradually. She took scarcely any nourishment for a fortnight: the remedies, apparently most efficacious, were blisters to the head and

* This circumstance is considered by the superstitious as a certain omen of death. However, in two instances of the kind, which occurred to me during the present year, the dogs have proved false prognosticators, as both patients happily recovered. The reason why dogs occasionally present themselves, in the night, at a house where any one lies sick, is, that, having lost their masters, or missed their way, they seek protection; and, in consequence, repair where the lights and stir in the house give hopes that they may gain attention, which they endeavour to do by a most piteous howling.

other parts, sinapisms applied to the feet, and calomel given occasionally in moderate doses.

The contagious malignant Fever, it was formerly remarked (page 163), often supervenes to the Synochus, or Summer Fever; in which case, petechial spots, hæmorrhagy, a dry, brown, or black tongue, and a quick irregular pulse, are united with violent pains of the head, and delirium, pains and tension of the stomach or bowels, sometimes attended with diarrhœa, sometimes with obstinate costiveness. This congeries of symptoms is very often fatal.

In the Bills of Mortality, from the 19th of September to the 17th of October, the following Number of Deaths has been recorded:

Aged	70	Inflammation and Abscess	44
Apoplexy and suddenly	17	Lunatic	4
Ague	1	Measles	21
Brain-Fever	2	Mortification	12
Cancer	7	Palsy	4
Child-bed	11	Rupture	2
Consumption, Cough, and Asthma	292	Rheumatism	2
Convulsions	291	Scurvy	1
Croup	2	Small-pox	19
Dropsy	53	Sore-throat	1
Fever	122	Still-born and Abortive,	40
Flux	1	Teeth	16
Gout	10	Water in the head	5
Hooping-cough	25	Worms	1
Jaundice	7		

ACCOUNT OF DISEASES IN LONDON,

From the 20th of October to the 20th of November.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Catarrh	21	Angina maligna	1
Acute Rheumatism	4	Aphthous Sore-throat	2
Peripneumony	1	Hooping-cough	2
Peritoneal Inflammation,	1	Slow Fever	2
Apoplexy	2	Child-bed and Milk Fevers	4
Contagious, malignant Fever	5	Acute Diseases of Infants,	10
Scarlatina anginosa	2		

CHRONIC DISEASES.

Asthenia	15	Gastrodynia	9
Dropsy	7	Enterodynia	5
Chronic Rheumatism	5	Diarrhœa	8
Lumbago and Sciatica	3	Constipatio	9
Paralysis	2	Hæmorrhoids	3
Cephalæa	3	Menorrhagia	2
Epilepsy	2	Intestinal Hæmorrhagy	1
Hysteria	5	Chlorosis and Amenorrhœa	7
St. Vitus's Dance	1	Fluor albus	2
Convulsio	2	Scirrhus of the uterus	1
Cough and Dyspnœa	31	Scirrhus of the ovaria	1
Pulmonary Consumption,	6	Scirrhus of the liver	1
Pleuritic Stitch	3	Jaundice	2
Dyspepsia	8		

Tape-Worm	2	Dry Tetter	2
Ascarides	3	Scald-head	2
Gravel and Dysury	3	Purpura	1
Tabes mesenterica	2	Itch and Prurigo	5
Struma	3		

PERIODICAL DISEASES.

Quartan	1	Hectica adolescentium	4
Hemicranium	1	Hectica senilis	3
Periodic Gastrodynia	2		

On the approach of winter, the variety of acute diseases is always greatly reduced; and rheumatic, catarrhal, or other pulmonic complaints become most prevalent. Malignant Fevers, and other contagious diseases, have occurred in a much smaller proportion during the present, than in the two preceding months. The case of Angina maligna, along with the usual symptoms of a malignant Fever, exhibited deep ulcerations of the tonsils and adjoining parts, covered with ash-coloured sloughs, and surrounded by livid edges. Nevertheless, the fever ceased, and the ulcerations were healed in about eight days, by the use of a valuable bark *, lately imported from the colony at Sierra Leone.

* For a description of the qualities and medicinal effects of this bark, (called by the natives Bellenda,) see Dr. Winterbottom's Account of the native Africans in Sierra Leone, Vol. II. pp. 45 and 46, and Appendix II. pp. 243-253.—A. S.

Among the lists of Chronic Diseases, a never-failing series of complaints, mostly produced by the intemperate use of spirituous liquors, has been comprised under the titles of Dyspepsia, Gastrodynia, Enterodynia, and Intestinal Hæmorrhagy; to which may be added, several cases of the Asthenia, Paralysis, Apoplexy, Gravel or Dysury, Scirrhous liver, Jaundice, and Dropsy. Fevers, internal Inflammations, and many pulmonic diseases, are rendered inveterate, or even fatal, by the same kind of intemperance. On comparing my own observations with the Bills of Mortality, I am convinced, that considerably more than one-eighth of all the deaths which take place in persons above twenty years old, happen prematurely through excess in drinking spirits. These pernicious liquors are generally supposed to have an immediate and specific effect on the liver; which viscus has been found after death, in drinkers of spirits, hardened or altered as to its texture, discoloured, and diminished. It appears, however, that the stomach and bowels suffer first from the use of spirits: and that their baneful influence is afterwards extended gradually to every part of the body, producing a variety of morbid phænomena.

1. The usual symptoms of indigestion, at-

tended with a disrelish of plain food; with frequent nausea, and oppressive pains at the stomach; with an inexpressible sensation of sinking, faintness, and horror; and with sudden, convulsive discharges from the stomach into the mouth of a clear, acid, or sweetish fluid*.

2. Racking pains, and violent contractions of the bowels, and of the abdominal muscles. These symptoms often return, periodically, about four o'clock in the morning, being attended with extreme depression, or languor, a shortness of breath, and the most dreadful apprehensions.

3. In persons of the sanguine temperament, inflammations of the peritoneal membrane, long-continued, and producing intense pain, so that the slightest pressure on the abdomen cannot be endured.

4. Swelling of the abdomen, emaciation of the limbs, with frequent cramps; and pains of the joints, finally settling in the soles of

* This symptom is termed in Scotland the Water-brash, and is an usual effect of the deleterious spirit whiskey, manufactured in that country, and diffused with a lavish hand to persons of both sexes, at every period of life, as well among the middling classes as among the lower orders of the people.

the feet. These symptoms are succeeded by a degree of paralysis; or, at least, an incapacity of moving the limbs with any considerable effect.

5. Sallowness of the complexion, with dryness and scaliness of the skin. As the powers of circulation are more and more impaired, the red vessels disappear from the white of the eye, the secretion of bile is imperfectly performed, and the small hairs of the skin fall off, leaving the surface, especially of the lower extremities, very smooth and shining.

6. Jaundice, ascites, dropsical swellings of the legs, with general redness or inflammation of the skin, terminating in black spots and gangrenous ulcers.

7. A frequent recurrence of aphthous ulcerations in the mouth, throat, &c. and an offensive smell of the breath, similar to that of rotten apples.

8. Hæmorrhagy. The intemperate use of spirits often occasions profuse discharges of blood from the nostrils, stomach, bowels, kidneys, or bladder; and from the lungs, in persons of a consumptive habit. Women of the sanguine temperament, who indulge to excess, often have the catamenia very profusely, long after the usual period: in some

spirit-drinkers, I have known them continue beyond the sixtieth year of age.

9. An entire change in the state of mind: at first, low spirits, strange sensations, and groundless fears, alternate with unseasonable and often boisterous mirth: a degree of stupidity, or confusion of ideas, succeeds. The memory, and the faculties depending on it, being impaired, there takes place an indifference towards usual occupations, and accustomed society or amusements: no interest is taken in the concerns of others: no love, no sympathy remain. Even natural affection to nearest relatives is gradually extinguished; and the moral sense seems obliterated. The wretched victims of a fatal poison fall, at length, into a state of fatuity, and die with the powers both of body and mind wholly exhausted. Some, after repeated fits of derangement, expire in a sudden and violent phrenzy. Some are hurried out of the world by apoplexies: others perish by the slower process of jaundice, dropsy, aphthous ulcerations of the alimentary canal, and gangrenous ulcers of the extremities *.

* The above observations on the pernicious effects of the abuse of spirituous liquors were republished in a separate and more accessible form by the Society for bettering the

The limits of the present work will not admit of a more extended view of the dreadful

Condition of the Poor; and the Author was induced at the same time to subjoin some directions for the management of the sufferers: as this Tract has been long out of print, the insertion of the mode of treatment therein recommended may not be unacceptable to the reader.—A. S.

" *Directions in the first Stage.*

" Those who are awakened to a sense of the evils which threaten them, in the *first stage* of the above disorder, *while only the stomach and bowels are much affected,* have it in their power to retreat from danger, to avoid a lingering painful death, and to recover health with tranquillity. But this cannot be accomplished by exchanging one form of spirit for another, nor by substituting (in place of spirits) opium, or any of its preparations;—a plan which many have tried, but with the effect of producing a much worse state, and more dreadful sensations than those they wished to avoid. Some have resolutely broken the chain, rejecting at once all fermented liquors, and have persevered through life in drinking water alone. Examples of this kind, though praiseworthy, are seldom followed. A *gradual weaning* from the destructive beverage has been attempted with more success, but it requires a fixed determination.

" The spirit should first be *diluted* with an equal proportion of water, and its quantity be afterwards a little diminished daily. In the mean time, the stomach must be habituated to the use of *porter;* or, in some individuals, *wine;* —both of which are usually rejected by spirit drinkers, as too cold, flat, and acescent.—By this change of liquors it is not proposed to recommend one species of excess in lieu

effects produced by drinking spirits; but I can, with pleasure, refer to two publications

of another. Though wine may be proper and useful, no man can benefit his constitution by it, who constantly takes beyond six glasses of a moderate size in 24 hours. A labourer will receive more durable support, and exhilaration, from *porter* than from *spirits:* but the advantages of it would be likewise entirely defeated, if a quantity were every day taken, nearly sufficient to produce a state of intoxication.

"When a glass of spirit has been drank merely as a pastime, to fill up the pauses of work, that object might be attained in a much more innocent way, by taking *snuff*, or smoaking a *pipe of tobacco*, over a pint of beer: for tobacco has a no less cheering effect than spirits, while it is not in any respect detrimental.

"Whoever makes the attempt to abandon spirit-drinking will find, from time to time, a *rankling on the stomach*, with a sensation of *sinking*, *coldness*, and *inexpressible anxiety*. This may be relieved by taking often a cup-full of an infusion of *cloves*, made by steeping about an ounce of them in a pint of boiling water for six hours, and then straining off the liquor. In a state of permanent languor and debility, an ounce and a half of the cascarilla bark should be added to the infusion. This mixture, taken in the quantity above specified, three times a-day, will be found an useful strengthener of the stomach and bowels, when they have been disordered by frequent excess and intoxication. In the trial to exchange the use of spirits for that of malt liquor, &c. there will be for the first month or two a *disagreeable heat* and *acidity* occasionally felt in the stomach; which may be removed by a tea-spoonful of magnesia, or prepared chalk, taken in the infusion of cloves, or in a glass of simple pep-

on the subject, by experienced physicians, whose statements, if attended to, could not

permint water. The *yolk of an egg* taken from the shell, without any preparation, likewise contributes to the same effect. The diet should be so regulated, as to nourish and support the body, without oppressing the organs of digestion.—But little should be taken at a time, and repeated according to the state of the appetite: the food to consist of *tea*, or *cocoa*, with a good proportion of milk in it; *gruel*, *broth*, *sago*, *jellies*, and *bread-pudding*; afterwards as strength is restored, *flounders*, *oysters*, and any light *fresh meat*. The slighter articles may be taken between meals, for the purpose of alleviating the sensation of faintness and sinking at the stomach, which so frequently recurs.

"*Directions in the second Stage.*

"In the second stage of the disorder, when the *complexion* becomes *sallow*, the face bloated, the *eyes pearl coloured*; when external inflammation, or inward *hemorrhagy*, is superadded to *hardness* and *swelling* of the *belly*, and a *dropsical* state of the lower limbs; it is not only necessary to refrain from the exciting cause, but to apply (under the direction of some experienced practitioner) a *course of* medicine, adapted to the circumstances of the case, and to the constitution of the sufferer. Any attempt to discontinue the use of spirit at this period, when the habit is fully confirmed, occasions extreme *debility*, *lowness*, *tremors*, and even the *dread of instant death*. This apprehension has not, I believe, in any instance been realized; yet patients are so strongly impressed with the idea, that the utmost caution is requisite. An unexceptionable plan, which has by some at least been adopted with success, is to drink as often in the day as usual, and always out of the same glass, but

fail to deter the readers from a practice so injurious to individuals, and to society at large*.

every time it is emptied, to put in a drop of melted sealing-wax, till at last no cavity shall remain, when it is presumable the habit may be subdued, and health, with self-command, be restored. A light nutritive diet, selected from the articles abovementioned, is at the same time proper.

"*Directions as to the last Stage.*

"In the last stage, when both the bodily powers and faculties of the mind are impaired, or nearly lost, any representations to the patients themselves must be fruitless. The interference of relations or friends, becomes necessary: and their exertions, with the assistance of a confidential physician, or surgeon, may sometimes reinstate a shattered constitution. Most of the persons affected, however, sink from their state of wretchedness to the grave.—Let their fate admonish others, who have thoughtlessly commenced the same career, to stop in time, and to endeavour, while it is yet in their power, to regain that peace of mind and vigour of body which render human existence most truly valuable."

* Dr. Anthony Fothergill's Essay on the Abuse of Spirituous Liquors; Dr. Lettsom on Hard Drinking; see also Memoirs of the Medical Society, Vol. I. p. 152. I cannot here pass over the elegant author of "Scotland's Scaith," whose patriotism deserves the warmest thanks of his countrymen.

The Deaths recorded in the Bills of Mortality for the last Four Weeks are as follow:

Aged	79	Jaundice	9
Apoplexy, and suddenly,	14	Inflammation and Ulcers,	31
Bleeding	2	Livergrown	1
Cancer	7	Lunatic	10
Child-bed	15	Measles	17
Consumption, Asthma, &c.	318	Mortification	13
Convulsions	274	Palsy	6
Croup	2	Pleurisy	4
Dropsy	61	Rupture	1
Fever	96	Small-pox	22
Fistula	2	Still-born, and Abortive,	44
Gout	6	Stone	1
Gravel	2	Teething	34
Gripes	1	Thrush	3
Hooping-cough	15	Water in the head	3
		Worms	2

ACCOUNT OF DISEASES IN LONDON,

From the 20th of Nov. to the 20th of Dec.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Catarrh	12	Inflamed and ulcerated Sore-throat	5
Peripneumony	1	Scarlatina anginosa	11
Enteritis	1	Measles	8
Acute Rheumatism	2		

Hooping-cough	2	Slow Fever	3
Small-pox	2	Child-bed and Milk Fevers	5
Chicken-pox	9	Acute Diseases of Infants,	8
Malignant Fever	3		

CHRONIC DISEASES.

Asthenia	11	Diarrhœa	6
Chronic Rheumatism	8	Hæmorrhoids	2
Lumbago	4	Worms	3
Dropsy	5	Tabes mesenterica	3
Paralysis	2	Scirrhus	4
Cephalæa	4	Menorrhagia	1
Epilepsy	2	Chlorosis and Amenorrhœa	7
St. Vitus's Dance	1	Scrophula	5
Syncope	3	Porrigo	2
Cough and Dyspnœa	36	Acne	2
Phthisis pulmonalis	9	Phthiriasis	1
Spitting of blood	4	Itch	3
Pleuritic Stitches	3	Pompholyx	1
Dyspepsia	12	Lichen	2
Pyrosis	1	Nettle-rash	1
Hæmatemesis	1	Gangrenous Ulcer	1
Gastrodynia	9		
Enterodynia	4		

Malignant Fevers were succeeded, in December, by an extensive diffusion of the Measles, Scarlatina, Chicken-pox, and other contagious complaints, the progress of which has been favoured by an unusually warm and humid state of the air. The Measles have prevailed mostly in Westminster, the Scarlet

Fever in the City, and Borough of Southwark.

A young man, suddenly affected with Inflammation of the bowels, complained at first of great heat, intense thirst, general uneasiness, &c. and felt an acute pain on pressing the abdomen. In a few hours, he was affected with convulsive motions in the limbs, and unusual confusion of thought. From this state, however, he soon recovered after being bled very largely.

In five cases of the Chicken-pox, which occurred in one family, the eruption was attended with some swelling of the tonsils, and an appearance of ulcerated specks or pustules upon them, a circumstance I never before noticed. An attending servant and the mother of the children had a similar enlargement of the tonsils, and slight ulcerations, but without the vesicular eruption on the skin.

The proportion of Small-pox has been, throughout the present year, remarkably small: the deaths from this disease, as reported by the Bills of Mortality, were only 522; whereas the number, last year, was 3548. In the Small-pox Hospital, only seven persons died of the natural Small-pox out of the whole number admitted since Christmas

1796. At the Hospital for Inoculation, the practice has been very successful. Five hundred and fourteen persons were inoculated, and went through the disease, in the hospital: 786 were inoculated, not being admitted into the house, but left, with proper directions, to the care of their parents or relatives. Of the whole number (1300), only two died in the course of the year.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of December 1797, to the end of March 1798.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Catarrh	53	Apoplexy	4
Acute Rheumatism	16	Hæmoptoë	7
Inflammatory Sore-throat	9	Hæmatemesis	1
Aphthous Sore-throat	6	Intestinal Hæmorrhagy	2
Angina parotidæa	1	Abortion	3
Ophthalmia	14	Scarlet Fever	10
Peripneumony	4	Measles	6
Pleurisy	1	Small-pox	3
Peritoneal Inflammation	3	Chicken-pox	3
Inflammation of the bowels	1	Hooping-cough	11
Nephritis	1	Contagious malignant Fever	7
Gout	4	Dysentery	1

Erysipelas 1
Ephemera 1
Slow Fever 7
Child-bed, and Milk Fevers 5
Acute Diseases of Infants, 48
Quotidian 1
Tertian 2
Hectica infantilis 4
Hectica puerilis 1
Hectica adolescentium .. 7
Hectica senilis 8

CHRONIC DISEASES.

Cough and Dyspnœa ... 114
Pulmonary Consumption 31
Spitting of blood 6
Pleurodyne 7
Chronic Rheumatism ... 32
Lumbago and Sciatica, 10
Dropsy 19
Asthenia 29
Head-ache and Vertigo, 18
Hemicranium 3
Syncope 2
Hysteria 12
Epilepsy 5
Chorea 1
Palsy 7
Hydrocephalus 1
Hypochondriasis and Melancholia 5
Palpitatio 3
Angina pectoris 1
Dyspepsia 31
Pain of the stomach and bowels 25
Diarrhœa 23
Colic 2
Colica Pictonum 3
Constipatio 4
Hernia 2
Piles 4
Gravel and Dysury 6
Enuresis 2
Hæmaturia 3
Menorrhagia 7
Chlorosis and Amenorrhœa 14
Fluor albus 6
Scirrhus and Cancer uteri 4
Scirrhus of the liver 4
Jaundice 6
Prolapsus 1
White Swelling 1
Scrophula 10
Rickets 5
Tabes mesenterica 8
Worms 9
Dentition 6
Thrush 4
Strophulus 4
Lichen 3
Lepra and Scaly Tetter, 7
Dandriff 3
Icthyosis 1

Nettle-rash	1	Ecthyma	1
Purpura	2	Itch and Prurigo	13
Erythema	1	Porrigo	9
Herpes	1	Acne	4
Intertrigo	2	Lupus	6
Impetigo	3	Furunculus	2

Of the above numbers, there died of

Peripneumony	1	Old Coughs, and Consumption	14
Hæmoptoë	3	Organic Disease of the heart	1
Scarlet Fever	1	Cancer uteri	1
Putrid Fever	1	Scirrhus of the liver, without dropsy	1
Hooping-cough	3	Tabes mesenterica	3
Slow Fever	2	Constipation, and Hernia,	2
Puerperal Fever	1	Diabetes	1
Fevers in Infancy	5		
Hectica senilis	5		
Dropsy	5		

The air being moist and warm, at the beginning of the year 1798, the series of diseases, mentioned in the last report, was continued to the end of February. From that time the wind was for some days in the east and north-east, but, on the 17th, suddenly changed to the west and south-west, and was very variable afterwards till the 18th of March, when it again settled in the north-east quarter. In February, the Measles and Scarlatina yielded to the Hooping-cough, and Catarrhal Fevers, which predominated till the latter end of March. The extraordinary number of the

Acute Diseases of Infants must be referred principally to an epidemic Catarrh, affecting them in a greater proportion than adults. This disease began the second week in February, and continued about a month. It was not, I think, contagious; but it seemed more inflammatory, and was attended with a more severe cough, with a much greater degree of fever, of heat, and inquietude, than occurred in a similar epidemic, January 1796, mentioned in page 130. Hence the Catarrh of 1798 required a very different mode of practice from that employed in the former one, being not soon removed, unless by the repeated application of leeches and blisters to the chest, by purgatives, and a cooling regimen. The only particular circumstance I noticed in adults affected with this complaint was an excruciating pain of the forehead, mostly over the left eye, which returned periodically for several successive days, at a stated hour after noon, and continued through the greater part of the night.

The Measles were, in general, mild and favourable. One of the cases of Scarlatina anginosa proved fatal: the patient was a stout young woman, who, during her attendance on two children affected with the disease, took the infection herself, January 20, and

died the second night after the commencement of the sore-throat and scarlet efflorescence. Instances of sudden death, at an early period of this virulent distemper, sometimes within six hours after its first attack, I have from time to time observed both in children and adults.

In February and March, Inflammation of the ball of the eye* was a frequent and troublesome complaint; I notice it, however, more on account of its unusually extensive diffusion than for any thing particular in its appearance.

Many persons who had Catarrhal Coughs in March were farther affected with spitting of blood, thick, viscid expectoration, pains within the chest, hectic fever, and diarrhœa interchanging with night sweats, but recovered†, notwithstanding, in the month of

* Ophthalmia catarrhalis; Sauvages, Nosolog. Med. Ophthalmia epidemica; Hoffman, tom. ii. sect. 2. cap. 11.

† To a less experienced observer than the author, these cases, and those mentioned above (pp. 131-2), might have suggested the idea, that recovery from confirmed Phthisis had taken place under the agency of the remedies employed. Considered in connection with the experiments of Sir Everard Home, (see his Dissertation on the Properties of Pus,) which shew that loss of substance in the part is not a necessary consequence of the formation of pus, they may serve to elucidate the history of the success-

April. The difficulty of distinguishing with exactness the accession of Phthisis pulmonalis was formerly remarked (see page 132). I hope to be excused in repeating this observation, as it enforces one practical point of some consequence, that in Coughs succeeding to Catarrhal Fevers we should not be too hasty in pronouncing a case to be decidedly phthisical; nor, whenever the lungs are inflamed, discontinue, so long as a possibility of benefit remains, the proper regimen and the means of resolution.

ACCOUNT OF DISEASES IN LONDON,

From the 31st of March to the end of June.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Catarrh	23	Otalgia	1
Acute Rheumatism	20	Inflammatory Sore-throat,	8
Ophthalmia	5	Angina herpetica	2

ful treatment of many cases, in which the lungs were supposed to be ulcerated.

"The extensive mass of disease," says Dr. Ferriar, "generally apparent in inspecting the lungs of phthisical subjects, and the strange formation of new morbid parts in it, would require for its amelioration, an effort of the Power which originally created the living body."—Medical Histories and Reflections, Vol. II. p. 314.—A. S.

Angina parotidæa..... 1
Peripneumony..... 6
Inflammation of the bowels..... 3
Peritoneal Inflammation, 1
Nephritis..... 1
Phlegmone testis..... 1
Gout..... 4
Apoplexy..... 3
Epistaxis..... 1
Hæmoptoë..... 6
Hæmorrhagy from the stomach and bowels... 5
Renal Hæmorrhagy.... 1
Abortus, and Menorrhagia.....14
Erysipelas 2
Measles.....15
Scarlatina anginosa..... 9
Small-pox 16
Chicken-pox 2
Hooping-cough..... 7
Contagious, malignant Fever 12
Summer Fever..... 6
Dysentery 1
Slow Fever.....11
Child-bed, and Milk Fever 6
Acute Diseases of Infants, 30

Quotidian..... 2
Tertian..... 1
Hectic 6
Hemicranium..... 4

CHRONIC DISEASES.

Cough and Dyspnœa ...63
Pulmonary Consumption, 26
Spitting of blood 6
Pleurodyne..... 7
Chronic Rheumatism...25
Lumbago and Sciatica...10
Dropsy.....22
Asthenia.....44
Head-ache and Vertigo..15
Syncope..... 2
Hysteria.....11
Epilepsy..... 5
Hydrocephalus..... 1
Hypochondriasis, and Melancholia..... 6
Paralysis..... 5
Palpitatio..... 4
Bilious Vomiting..... 4
Dyspepsia.....29
Pain of the stomach and bowels.....20
Diarrhœa.....13
Constipatio..... 4
Hernia.....12
Colic..... 2
Colica Pictonum..... 3
Hæmorrhoids..... 4
Gravel, Stone, and Dysury..... 8
Enuresis..... 1

Hæmaturia..... 1	Lichen 2
Amenorrhœa and Chlorosis 16	Lepra and Scaly Tetter..11
Fluor albus.....11	Dandriff..... 1
Scirrhus uteri..... 2	Nettle-rash..... 1
Scirrhus hepatis..... 2	Purpura..... 4
Scrophula..... 8	Erythema..... 1
Rickets..... 3	Herpes 1
Curvature of the spine... 1	Impetigo..... 6
Psoas Abscess..... 1	Ecthyma..... 3
Tabes mesenterica.....13	Itch and Prurigo.....15
Worms.....10	Porrigo..... 7
Dentition 3	Acne 4
Thrush..... 3	Lupus..... 2

Died of

Peripneumony..... 2	Slow Fever 2
Apoplexy 1	Fevers in Infancy..... 4
Hæmoptoë..... 1	Hectica adolescentium... 1
Hectic Cough after the Measles 1	Hectica senilis..... 2
Small-pox 2	Pulmonary Consumption, 7
Malignant Fever..... 2	Dropsy..... 1
Summer Fever..... 1	Scirrhus uteri..... 1
	Tabes mesenterica..... 3

The spring of 1798 was a genuine English spring with respect to its temperature, the variation of the thermometer being in May 34°, in April and June nearly 40°. The quantity of rain was moderate. The wind was very variable, but chiefly blew from the east and north-east points till Midsum-

mer, after which it changed, as usual, to the west and south-west.

The foregoing list of diseases, which contains the result of my public and private practice, will perhaps nearly exhibit the proportion of acute diseases to each other throughout London; and ascertain the majority of rheumatic, and other inflammatory complaints, during the last three months.

Two cases of the Peripneumony required bleeding; the remaining four were of the kind formerly described, (see page 181,) and in two instances fatal. I think it not amiss to quote in this place Dr. Fothergill's account of an analogous species of Peripneumony observed by him fifty years ago*. "The only disease I have seen that has looked like an epidemic was an insidious species of Peripneumony. The sick complain first of chillness, shivering, and general pain, frequently of the limbs, then of some part about the thorax; but this last never acute; not often with a cough, and sometimes without much difficulty of breathing. They frequently complain of pain upon sneezing, coughing, or even swallowing, on one side of the neck,

* On Weather and Diseases, April 1751. Gentleman's Magazine, vol. xxi.

just above the place where the middle of the mastoid muscle takes its rise from the clavicle: this is often acute, and where it is so, from an instance or two I have seen, seems to afford a bad prognostic. The patients can lie easy in one posture, which is commonly upon the back, but not on either side. They have, or affect to shew, great composure and ease, which imposes on those about them, till they are suddenly alarmed with some unexpected alteration, which carries the patient off in a short time.

"The blood is commonly sizy; the urine crude or turbid, without a fair sediment; the pulse quick, small, at length weak, and with a remarkable jerk; the tongue moist; and drinking is rather fatiguing than pleasant. Early bleeding, gentle antiphlogistic purges of sal cathart. and manna in the pectoral decoction; cupping on the side, with blisters, mild diaphoretics, and pectorals intermixed, have, in some cases, been successful."

Rheumatic Fevers were numerous, violent, and of long duration. These, with other inflammatory complaints, took place in many individuals of the volunteer corps, who, recommencing their exercises with the spring, and being engaged very early in the morning,

or often late in the evening, suffered much from a mode of exertion and exposure to which they had not been for some time accustomed.

The Rheumatism but seldom occurs here under its genuine inflammatory form. It is attended, in many cases, with every mark of extreme debility; with a weak and quick pulse, never less than 120; with sighing, fainting, or hysterical symptoms; with spontaneous sweating, and miliary eruptions. Such a state is hinted at by Dr. Musgrave, under the article of Arthritis chlorotica; and was before mentioned, as being occasionally connected with, or succeeded by the Hectica adolescentium (see page 143). On this statement it must appear that blood-letting is generally inadmissible. Some practitioners, however, continue to let blood in most cases of Acute Rheumatism, thinking themselves justified in their mode of practice by the sizy appearance of the blood. The same principle might lead them to empty the whole sanguiferous system; for, every time blood-letting is repeated, the blood becomes more and more dense, or sizy. I have farther observed, that, by bleeding repeatedly, the pains, swellings, and febrile symptoms, were not

only aggravated at the time, but often protracted indefinitely; at least I have seen them continue, under such a mode of practice, upwards of two months. The ill success of it probably first induced other practitioners to adopt an opposite plan; when it was found that Peruvian bark, and vitriolated iron *, or the precipitate of it combined with myrrh, as recommended by Dr. Griffiths, afforded both speedy and permanent relief. I cannot omit remarking that Dr. Fothergill, in the work above quoted, had investigated the necessity of administering bark in this disease, at a time when blood-letting was employed by his contemporaries even in putrid Fevers. After noticing an insidious and dangerous species of Rheumatism, which occurred in November 1752, he observes in his report for February 1753: "Rheumatisms were common, especially among children from four to eight or ten years old: these young subjects generally were seized with a pain about the

* Dr. Musgrave (page 38), after recommending preparations of iron in the Chlorotic Arthritis, observes; "Marti nullum aptius vehiculum, quam aquæ martiatæ, per urinam exeuntes; nec uno tantum nomine, pallidis his arthriticis conveniunt: coctionem integrant; sanguinem exaltant; æstuque exundanti virus arthriticum, abluunt, abripiuntque; tum arthritidi, tum Chlorosi simul adversantes."

neck, back of the head, or the shoulders; from hence it often shifted to the hands and feet, and knees, and plainly discovered its nature by the swellings it produced: the fever attending it had regular exacerbations in the evening, followed by moderate sweats, and freedom from pain in the morning; which interval continued with a calm, quiet pulse till four or five in the afternoon, when the symptoms again appeared. In some young subjects, where evacuations were used too freely, either by bleeding or purging, the disorder proved suddenly and unexpectedly fatal; the pains of the head became violent, either a convulsion, or hemiplegia, or both, succeeded, and death soon followed. A decoction of the bark, with rhubarb sufficient to keep the belly open, given in small doses, and often, (especially in the intervals,) commonly removed the disorder in a few days, with great certainty; whilst bleeding, purging, and diaphoretics, often rendered the distemper tedious, and sometimes, as is observed above, fatal."

Having formerly noticed the impropriety of applying the same mode of practice to every case of a disease, or of prescribing merely from its name, instead of consider-

ing the state of the constitution affected with it, I cannot, perhaps, better conclude the present article than by referring to the general directions with regard to blood-letting, dictated, with equal simplicity and precision, by the elegant physician of the Augustan age*.

ACCOUNT OF DISEASES IN LONDON,

From the 30th of June to the end of September.

List of the Cases which occurred in my own Practice,

ACUTE DISEASES.

Summer Fever	18	Inflammatory Sore-throat,	5
Cholera	3	Ulcerated Sore-throat...	3
Dysentery	8	Aphthous Sore-throat...	6
Small-pox	7	Angina parotidæa	1
Scarlatina	9	Axillary Abscess	2
Measles	6	Pleurisy	1
Hooping Cough	8	Peripneumony	2
Contagious, malignant Fever	27	Peritoneal Inflammation,	2
Chicken-pox	1	Inflammation of the bowels	2
Erysipelas	1	Hepatitis	1
Catarrh	8	Nephritis	2
Acute Rheumatism	5	Apoplexy	1

* A. C. Celsus, lib. ii. cap. 10, De sanguinis detractione per venas.

Hæmoptoë..... 4
Hæmatemesis..... 1
Intestinal Hæmorrhagy, 2
Menorrhagia and Abortus..... 3
Ephemera 5
Slow Fever..... 3
Child-bed and Milk Fevers 6
Acute Diseases of Infants, 26
Tertian..... 2
Hectic.....17
Hemicranium..... 1

CHRONIC DISEASES.

Cough and Dyspnœa....37
Pulmonary Consumption, 17
Spitting of blood 2
Pleurodyne..... 5
Chronic Rheumatism ...16
Lumbago and Sciatica... 5
Dropsy.....21
Asthenia.....53
Head-ache and Vertigo, 19
Syncope..... 1
Hysteria.....12
Epilepsy..... 5
Palsy..... 4
Hypochondriasis and Melancholia..... 7
Hydrocephalus 1
Palpitatio..... 2
Bilious Vomiting..... 9
Dyspepsia.....39
Pain of the stomach and bowels.....25
Diarrhœa.....39
Piles 1
Colic..... 3
Colica Pictonum..... 2
Constipatio..... 8
Gravel, Stone, and Dysury 9
Eneuresis..... 1
Hæmaturia 1
Menorrhœa and Fluor albus.....18
Chlorosis and Amenorrhœa.....13
Scirrhus and Cancer uteri, 3
Scirrhus of the liver.... 1
Prolapsus ani..... 2
Prolapsus uteri 1
White Swelling..... 1
Scrophula..... 8
Tabes mesenterica..... 7
Worms..... 5
Dentition 4
Contractura 1
Thrush..... 4
Strophulus..... 2
Lichen 1
Lepra and Scaly Tetter..13
Dandriff..... 3
Purpura..... 3
Herpes..... 1
Intertrigo..... 2

Impetigo	1	Porrigo	6
Ecthyma	2	Acne	5
Itch and Prurigo	14	Lupus	1

Died of

Measles	1	Pulmonary Consumption,	7
Scarlet Fever	2	Dropsy	3
Small-pox	1	Hydrocephalus	1
Malignant Fever	5	Scrophulous Ulcers	1
Fevers in infancy	3	Tabes mesenterica	3
Hectic of old age	3	Purpura hæmorrhagica	1

From the end of June to October, the weather was mostly warm, cloudy, and moist, with very variable winds in August and September. Such a season after Midsummer, along with some intermixture of inflammatory complaints, always favours the extension of infectious Fevers, and heightens their malignity. This observation was fully exemplified during the month of September, in which, along with the Scarlatina, Measles, &c. there occurred a greater number of Contagious, malignant Fevers, both in the city and adjacent villages, than had been known for many years before. The fatality of the disease was very considerable; one of every five or six persons affected with it having died: whereas, according to observations formerly made, the proportion of deaths from malig-

nant Fevers was not more, during the most unfavourable seasons, than one in seven; and, at favourable periods, but one in twenty cases. Hæmorrhagy, aphthæ, diarrhœa, subsultus tendinum, floccilegium, violent delirium ending in deafness and stupor, hiccough, and involuntary excretions, were the usual accompaniments of the Fever. There was, however, one instance of a recovery from this state in a girl nineteen years old, who had frequent cold sweats, with a weak, fluttering pulse, and who remained more than eight days apparently torpid and insensible. A man, aged forty-eight, after having recovered from the Fever, relapsed on the following day, and passed a second time through all its untoward symptoms. I attended him, on the whole, forty days. I recollect a similar instance, October 1786, in a younger man; who, after exposure to cold, was affected with violent shiverings, succeeded by heat, restlessness, pains of the head and limbs, a dry, brown tongue, diarrhœa, and almost constant delirium. On the thirteenth night, he had a warm, universal perspiration: in the morning of the fourteenth, his tongue was clean and moist; he had a good appetite, was perfectly sensible, and free from fever.

In the evening of the same day, his disorder returned as at first. The delirium, which soon commenced, terminated in coma; the diarrhœa likewise returned, and his discharges were involuntary. He died on the ninth morning after this second accession of fever.

The cases of Cholera and other disorders of the bowels, though very numerous, presented nothing new, or worthy of particular observation. Inflammations of the bowels, which occur at this season, are sometimes treated slightly, being mistaken for Enterodynia, Colic, &c. and considered as the effect of indigestion, flatulence, or acrimonious bile. Since the consequences of this oversight may be fatal, a certain diagnostic of Enteritis would be a desirable object. The violent and alarming symptoms, produced by an Inflammation of the ileum, or of any part of the smaller intestines, enforce attention, and have been fully detailed by practical writers. Mistakes chiefly arise respecting inflammation of the lower intestines, as of the colon about its connections with the rectum, or cæcum. It does not, as in the other case, occasion by excruciating pain, instant debility and depression, with vomiting, cold sweats, &c. There is at first a local but moderate pain,

somewhat aggravated by pressure, and attended with thirst, and general uneasiness. This pain seems afterwards to diffuse itself, producing strong contractions of the bowels and abdominal muscles, which recur from time to time, but leave considerable intervals of ease and tranquillity. The disorder, however, differs from the colic in this respect, that it is not attended with obstinate costiveness; and that, after sufficient evacuations, the pain is not mitigated. On the other hand, as the intestine is tender and probably contracted about the seat of the inflammation, a most severe pain is often excited by the operation of the mildest purgative. The pulse may at the beginning be hard and contracted; but it soon becomes weak, small, and perhaps irregular. There is a fur upon the tongue, somewhat thick, and of a whitish colour. The urine has a smooth, pink sediment, which, as the disorder advances, changes its colour, and resembles a rough cretaceous powder. Vomiting is not a constant symptom in this form of Enteritis.

When improperly treated, the disease terminates by gangrene, or by extensive adhesions of the folds of the intestines, and an effusion of matter into the abdominal cavity;

which often causes a large tense swelling externally, and proves in a short time fatal. In an examination after death of the bodies of two persons thus affected, when the peritoneal membrane was divided, there issued out with violence a most fetid exhalation; and, after it, were discharged between two and three quarts of an opaque, thick matter, which had been lodged in the cavity of the abdomen. There was much inflammatory exudation on the surface of the bowels: only patches of inflammation, at that time, appeared on them, and on the edge of the liver. In one of the cases, the spleen seemed almost converted in a putrid mass.

If the small intestines should be inflamed, a prompt and decisive mode of treatment is requisite; otherwise the disease terminates in gangrene and death within twenty-four hours, and sometimes in eight or ten hours. Inflammation of the lower intestines does not, as stated by systematic writers, terminate on the fourth day in suppuration or gangrene. I have known it continue, with repeated paroxysms of violent pain, for ten days; yet the patient has recovered. Should we, therefore, be called to such a case on the eighth day, it might still be proper to consider it as

inflammatory; and, according to the state of the patient's constitution, to employ bleeding, particularly cupping, with blisters, fomentations, or the warm bath, and a strict antiphlogistic regimen. When opiates, warm purgatives, aromatics, and spirituous drinks, are incautiously administered at the beginning of the disorder, it becomes inveterate, and soon terminates fatally. I have been minute in the above observations, because some lives are lost every autumn by not discriminating Inflammation from other complaints of the bowels, which take place in great numbers, and under various forms, at that season of the year.

The fatal case of Purpura was at Deptford: the patient a labouring man about fifty years of age. His disorder was of the haemorrhagic kind. (See page 203.) It must be remarked as a singular circumstance, that blood was not only discharged from the nose, mouth, and fauces, but issued in large streams from under the nails of his toes, from small livid vesicles about the throat externally, also from similar vesicles on the scrotum, thighs, and other parts of the body.

ACCOUNT OF DISEASES IN LONDON,

From the 30th of September to the end of December.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Contagious, malignant Fever	28	Nephritis	1
Catarrh	44	Apoplexy	4
Scarlatina	18	Hæmoptoë	1
Small-pox	7	Hæmatemesis	1
Hooping-cough	9	Menorrhagia and Abortus,	3
Chicken-pox	1	Ephemera	1
Gout	3	Slow Fever	5
Acute Rheumatism	3	Child-bed and Milk Fevers	7
Ophthalmia	3	Acute Diseases of Infants,	23
Inflammatory Sore-throat,	9	Pemphigus infantilis	1
Ulcerated Sore-throat	2	Febris miliaris	1
Aphthous Sore-throat	2	Urticaria febrilis	3
Peripneumony	7		
Peritoneal Inflammation,	2	Quotidian	1
Inflammation of the bowels	4	Hectic	5
Dysentery	3	Hemicrania	3

CHRONIC DISEASES.

Cough and Dyspnœa	96	Lumbago and Sciatica	7
Pulmonary Consumption,	22	Dropsy	15
Spitting of blood	2	Asthenia	25
Pleurodyne	4	Head-ache and Vertigo,	11
Chronic Rheumatism	18	Hysteria	5

Epilepsy	3
Chorea	1
Palsy	6
Hypochondriasis and Melancholia	6
Hydrocephalus	2
Palpitatio	6
Bilious vomiting	3
Dyspepsia	50
Pain of the stomach and bowels	24
Diarrhœa	33
Piles	5
Colic	5
Colica Pictonum	3
Hernia	2
Constipatio	2
Gravel, Stone, and Dysury	5
Enuresis	3
Ischuria	2
Hæmaturia	1
Menorrhœa and Fluor albus	10
Chlorosis and Amenorrhœa	13
Scirrhus pylori	1
Mammary Abscess	1
Scirrhus and Cancer uteri,	2
Scirrhus of the liver	4
Jaundice	3
Prolapsus ani	1
Rickets and Struma	8
Tabes mesenterica	11
Worms	11
Dentition	2
Contractura	1
Thrush	2
Strophulus	4
Lepra and Scaly Tetter,	7
Purpura	1
Pompholyx	1
Herpes	1
Intertrigo	1
Impetigo	5
Ecthyma	2
Itch and Prurigo	15
Porrigo	6
Acne	3
Lupus	1
Sycosis	1

Died of

Peripneumony	1
Apoplexy	1
Malignant Fever	5
Scarlatina anginosa	4
Small-pox	1
Pemphigus	1
Fevers in infancy	2
Hectica senilis	3
Pulmonary Consumption,	9
General Dropsy	2
Hydrothorax	1
Hydrocephalus	2

Devonshire Colic.....	1	Scirrhus of the pylorus..	1
Ulcer of the breast.....	1	Tabes mesenterica.....	1

October and November were cloudy or foggy, with much rain: in December, there were twenty cloudy, and ten clear and frosty days, with but little rain throughout.

Malignant Fevers continued, with the train of symptoms stated in the last Report, till nearly the middle of December. The fatal cases of Scarlatina were in the month of November, when the disease was more extended, and more virulent, than at any period within my recollection, since the years 1786, 1787. The Small-pox and Hooping-cough retained the same proportion to Fevers as in the last report; but I have not observed any cases of Measles since the middle of September. Rheumatic and other inflammatory complaints were much increased by the humid air, and variable temperature in October and November. Disorders of the bowels were, perhaps for a similar reason, numerous and violent. It may be added, that the same period proved, in a more than usual degree, fatal to persons affected with Consumptions, and other pulmonic diseases of long standing.

A case of febrile Nettle-rash being put down in the foregoing list, I will take the

opportunity of observing, that, when the Urticaria is an acute disease, the eruption, which appears on the third day, is preceded by pain and sickness at the stomach, head-ache, a sensation of anxiety and oppression, with a quick, small pulse, a whiteness of the tongue, great languor, and faintness. These symptoms are partially relieved on the appearance of the eruption; but the constitution remains disordered till the rash goes off with exfoliations of the cuticle, about the eighth day of the disease.

The febrile Urticaria is not contagious. It affects adults of a plethoric or sanguine habit, who indulge themselves with eating and drinking too freely. I have, however, often seen it in infants and children, to whom it occasions inexpressible torment.

Sennertus* and Juncker† have given a short account of this disease. Sydenham mentions it under the article Febris erysipelatosa‡. The eruption is aptly described by Linnæus in the following terms: "Sudamina pruriginosa, inæqualia, ruberrima, dilata-

* Pract. Med. lib. v. part 1. cap. 26.

† Conspectus, tab. 64. ‡ Sect. v. cap. 6.

bilia, fugacia, recidivantia, furfuraceo-evanescentia. Hectica brevis, benigna."

An Acute Disease, with an eruption of Miliary Pustules on the skin, and of Aphthæ in the mouth, affects particular constitutions during the spring and autumn. The symptoms of it will be described at large in the Treatise on Cutaneous Diseases *. I shall only observe at present, that this complaint has not been fatal in any instance presented to my observation; and that it is neither contagious nor epidemical, as some of the German physicians have supposed.

The total number of deaths by the Smallpox in 1798 greatly exceeds that of the preceding year. (See page 250.) This disease was so general in 1796, that few could have escaped its contagion. The new subjects for such an increased mortality must be produced by the births within the two years, and by

* The author, unfortunately for the interests of medical science, did not live to complete this extensive undertaking; and a full account of the *idiopathic* Miliaria (see above, and p. 231,) is still a desideratum in the history of cutaneous diseases. Instances of its occurrence, as a disorder distinct from the symptomatic species, are related by Dr. Parr, (Dict. Art. *Miliaria*,) and by Dr. Good, in his System of Nosology, p. 213, note.—A. S.

the influx of adult persons from the country who never had the Small-pox, to the amount of several hundreds annually.

General Bill of Mortality for the Year 1798.

Abortive and still-born,	594	Gravel, Stone, and Strangury	16
Abscess	26	Grief	7
Aged	1117	Headmouldshot, Horse-shoe-head, and Water in the head	67
Ague	8	Jaundice	69
Apoplexy, and suddenly	224	Jaw locked	2
Asthma and Phthisic	421	Inflammation	384
Bedridden	2	Itch	1
Bleeding	22	Lethargy	1
Bursten and Rupture,	18	Livergrown	7
Cancer	71	Lunatic	83
Child-bed	144	Measles	196
Colds	4	Miscarriage	2
Colic, Gripes, and Twisting of the Guts,	13	Mortification	262
Consumption	4533	Palpitation of the heart,	1
Convulsions	3663	Palsy	86
Cough and Hooping-cough	418	Pleurisy	15
Croup	14	Quinsy	5
Diabetes	1	Rheumatism	3
Dropsy	784	Rickets	1
Evil	4	Scurvy	4
Fevers of all kinds	1754	Small-pox	2237
Fistula	3	Sore-throat	12
Flux	12	Sores and Ulcers	11
French pox	39	Spasm	2
Gout	111	St. Anthony's Fire	4

Stoppage in the stomach	4	Worms	3
Teeth	370	Violent Deaths, Casualties, &c.	247
Thrush	49		

Christened	Males 9497	17,927.	
	Females 8430		
Buried	Males 8964	18,155.	
	Females 9191		

Out of this number, 5728 died under two years of age, 394 between eighty and a hundred, and 2 upwards of a hundred.

ACCOUNT OF DISEASES IN LONDON,

From the 1st of January to the 10th of February 1799.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Catarrh	33	Hooping-cough	7
Peritoneal Inflammation	1	Malignant Fever	5
Acute Rheumatism	9	Slow Fever	4
Ophthalmia	4	Child-bed and Milk Fevers	4
Inflammatory Sore-throat,	4	Acute Diseases of Infants,	12
Ulcerated and Specky Sore-throat	6	Pemphigus infantilis	1
Scarlatina anginosa	5		
Measles	3	Quotidian	2
Small-pox	4	Hectic	3

CHRONIC DISEASES.

Cough and Dyspnœa	86	Hæmaturia	1
Pulmonary Consumption,	17	Ischuria	4
Spitting of blood	5	Menorrhœa	5
Epistaxis	2	Chlorosis and Amenorrhœa	5
Chronic Rheumatism	6	Fluor albus	2
Rheumatic Tooth-ache	4	Scirrhus uteri	1
Sciatica, Lumbago, &c.	8	Scirrhus hepatis	2
Dropsy	7	Struma	8
Asthenia	19	Contractura	1
Cephalæa and Vertigo	17	Tabes mesenterica	2
Syncope	1	Worms	6
Palsy	6	Dentition	3
Chorea	2	Thrush	4
Epilepsy	1	Papulous Eruptions on the skin	3
Hysteria	2	Lepra	1
Palpitatio	3	Scaly Tetter	3
Hydrocephalus	1	Prurigo	1
Dyspepsia	15	Itch	4
Gastrodynia	8	Scald-head	6
Enterodynia	10	Ecthyma	3
Hæmorrhoids	2	Impetigo	1
Diarrhœa	10	Shingles	1
Colica Pictonum	2	Erythema	2
Hernia	2	Gutta rosea	2
Gravel	3		
Enuresis	2		

During the period above-mentioned, the only diseases which claimed attention from their frequency, were catarrhal and other pulmonic affections. These, however, pro-

bably from the mildness of the season after the first week in January, were not so fatal, nor nearly so violent in their symptoms, as similar cases occurring about the same period for three years past. Cases of the Hooping-cough, likewise, were numerous among children, but not fatal to any within my knowledge. Dr. Fothergill's remarks on this disease, with his estimate of its extent and fatality in different years, may be recommended to notice*. His plan of administering repeatedly antimonial emetics, though on many occasions advantageous, is not found so generally successful as has been stated by him in the "Medical Observations and Inquiries†." The Hooping-cough at its commencement has a febrile stage, which lasts one, two, or three weeks. Afterwards, although the paroxysms of coughing recur at intervals, it ranks as a chronic disease. While the febrile symptoms continue, the requisite mode of practice is the same as for the Measles in their latter stage,—by bleeding, or the application of leeches; by emetics,

* On Weather and Diseases, for May, December, &c. 1751-2.

† Vol. iii. p. 319.

blisters, purgatives, fomentations, warm vapour, pediluvium, or other remedies, according to the patient's constitution, and to the urgency of symptoms, jointly considered. In mitigating the severity of the cough, and in prolonging the intervals between the paroxysms, at the latter period of the disorder, I have found a watery solution of opium more efficacious than the extract of hemlock, or any other narcotic medicine hitherto employed.

The disease entitled Pemphigus infantilis coincides in its appearances with the Vesicular Fever, described by medical writers on the continent. It begins two or three days after birth * in weak, emaciated infants, with large oblong vesicles, containing a semitransparent lymph, and surrounded by a dark-red or livid base. The vesicles are often numerous, and appear successively on the neck, breast, thighs, and abdomen. When broken, they are succeeded by spreading and painful ulcerations. The pain, fever, and restlessness, attendant on the malady, were

* The Author, in his Treatise on Cutaneous Diseases, (page 537,) mentions a case in which the eruption occurred ten months after birth.—A. S.

not alleviated by the bark, or other remedies employed for it; but, in every case I have yet seen, extinguished life within seven or eight days.

It is not perhaps amiss here to observe, that the numerous cases of Pemphigus, given of late in periodical publications relating to medicine, have no affinity with the Vesicular Fever, but describe a chronic eruption, well known in North Britain, and there denominated the Water-blebs; cases of which have likewise been repeatedly marked in the preceding lists of diseases under the title of Pompholyx.

Under the article Ischuria are comprized two cases of the Renal Ischuria, which I have elsewhere* stated as a disease affecting children, and sometimes adults. It is usually the effect of an inflammation of the bowels, or mesentery; and, if not early discriminated and treated with judgment, it terminates in gangrenous patches, becoming suddenly fatal.

* In the "Medical Facts and Observations." These cases will be found at the end of the present volume.—A. S.

ACCOUNT OF DISEASES IN LONDON,

From the 10th of February to the 20th of March.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Catarrh	37	Small-pox	3
Acute Rheumatism	7	Herpes zoster	1
Inflammatory Sore-throat,	4	Child-bed and Milk Fevers	4
Ophthalmia	3	Acute Diseases of Infants,	11
Peripneumony	2		
Malignant Fever	7		
Scarlatina anginosa	10	Tertian	2
Measles	7	Hectic	2
Hooping-cough	3	Hemicrania	4

CHRONIC DISEASES.

Cough and Dyspnœa	87	St. Vitus's Dance	3
Hæmoptoë	5	Dyspepsia	12
Pulmonary Consumption,	12	Hæmatemesis	1
Chronic Rheumatism	18	Gastrodynia	7
Sciatica	2	Enterodynia	5
Asthenia	19	Diarrhœa	8
Dropsy	6	Constipatio	2
Paralysis	6	Scirrhus of the liver	1
Apoplexy	2	Jaundice	1
Cephalæa	6	Diabetes	1
Vertigo and Syncope	6	Gravel and Dysury	3
Hysteria	3	Menorrhœa	5

Chlorosis and Amenorrhœa	6	Lepra	1
Fluor albus	3	Purpura	1
Hæmorrhoids	2	Gutta rosacea	2
Tabes mesenterica	3	Impetigo	5
Struma	5	Ecthyma	1
Lichen pilaris	2	Itch	6
Prurigo	3	Porrigo	8

It is worthy of remark that, notwithstanding the predominance of Inflammatory complaints during the last six weeks, putrid Fevers, and the Scarlatina anginosa in its malignant form, have been very prevalent. The latter, more especially, has proved in many instances fatal; and, in those who recovered, it produced, after the cessation of the fever, anasarca, swelling of the abdomen, swelling of the lips and parotid glands, strumous ophthalmia, with an eruption of the Favus, and hectical symptoms of long duration. This disease spread from London to the adjacent villages, and was almost universal in Somers Town during the month of February.

By the term Constipatio is expressed not merely costiveness, but a stoppage of the bowels from some organical or local affection, as hernia, and introsusceptio; scirrhosity, or strictures of some portion of the intestine, narrowing and often obliterating the canal. Tumors and singular concretions, external to

the bowels, have occasionally the same effect. Strictures take place in different situations; but they occur so frequently about the sigmoid flexure of the colon, near its termination in the rectum, that this part should be carefully examined in every case of a total obstruction of the bowels. The insertion of an unyielding tallow candle, though often practised, has been generally found painful and inefficacious. It is requisite for the purpose to employ a bougie thirteen inches long, and of a proportionate strength; which should also be directed, with a nice hand, by a skilful surgeon. I lately saw a lady thus relieved, who had been twenty-six days without any evacuation from the bowels, and who seemed nearly exhausted by violence of pain, and distention of the abdomen, incessant vomiting, hiccough, cold sweats, &c. It is remarkable how long patients subsist under these distressing circumstances. In one instance, the time was twenty-nine days*; in another patient, thirty-three days †. As the latter recovered after enduring every torture such a disorder

* This case, with observations upon it, appeared in the London Medical Journal, and is republished in this collection.—A. S.

† Dr. W. Robertson, now physician at Bath, attended the person here referred to, who suffered no inconvenience

could inflict, practitioners may be encouraged to persevere steadily in their attentions, and to retain some hopes even in the greatest extremity.

The case of Diabetes is given at large, with the appearances after death, by Dr. Marcet, in the first volume of the Medical and Physi-

afterwards. The case, with the Doctor's remarks upon it, will, I hope, be soon published*.

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* Cases of long-continued constipation, terminating fatally, have been frequently recorded. Dr. Baillie has related (in the Transactions of a Society for the Improvement of Medical and Chirurgical Knowledge, Vol. ii. pp. 174-183,) a remarkable instance of this kind, in which the patient had no evacuation from the bowels for nearly fifteen weeks before death. Others, still more extraordinary for the protracted retention of the feces, are quoted from the foreign medical journals, by Dr. Good, in his System of Nosology, p. 41, note.

But we are probably in possession of very few well-authenticated cases in which complete relief was obtained, as in the one above-mentioned, after a period of retention extending to thirty-three days. The history of this case would have been now communicated, through this channel, to the public, had not the memoranda taken at the time it occurred, by Dr. Robertson, been unfortunately lost. The Editor is however happy to acknowledge his obligations to the politeness and liberality of that gentleman, for the following particulars, stated from memory, which cannot fail to be interesting to the Profession.

"The tongue, I remember, continued clean, and the pulse little affected, until an advanced period of the disease, when the distention was so great as to threaten rupture. The resin of jalap was the medicine which appeared to procure the first relief. The quantity of feces which came away in the course of the first days of recovery was very great, and the fetor intolerable. I cannot remember whether a bougie was tried, but a forcing syringe was had recourse to; and I think it improbable that the insertion of a long bougie, to ascertain whether there was a collection of feces in the rectum, to break them down if there, or to remove any other obstruction within the reach of such an instrument, could have been omitted."—A. S.

cal Journal. This disease has been relieved, and the saccharine quality of the urine removed, by animal diet, and the general plan recommended in Dr. Rollo's treatise on the subject: but I never yet met with a confirmed case, wherein there was not some considerable disorder of the constitution, or a defect in some organ essential to life.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of March to the 20th of April.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Catarrh	22	Malignant Fever	5
Acute Rheumatism	5	Slow Fever	6
Pleuritic Stitches	3	Abortus and Menorrhagia,	4
Peritoneal Inflammation,	1	Child-bed and Milk Fevers	2
Inflammatory Sore-throat,	4	Acute Diseases of Infants,	8
Specky Sore-throat	2		
Ophthalmia	7		
Scarlatina	6	Tertian	1
Measles	3	Hectica	7
Small-pox	3		

CHRONIC DISEASES.

Cough and Dyspnœa	79	Struma	5
Hæmoptoë and Phthisis,	18	Asthenia	21
Chronic Rheumatism	12	Hysteria	3
Lumbago and Sciatica	5	Epilepsy	2
Dropsy	9	Chorea	2

Paralysis	6	Chlorosis	8
Cephalæa	8	Worms	3
Epistaxis	1	Tabes mesenterica	3
Dyspepsia	10	Scirrhus	2
Gastrodynia	5	Itch and Prurigo	74
Enterodynia	4	Lepra	1
Diarrhœa	8	Nettle-rash	1
Colica Pictonum	2	Purpura	2
Hæmorrhoids	3	Gutta rosea	3
Jaundice	2	Porrigo	4
Fluor albus	4	Impetigo	1

The Measles, which prevailed extensively in February, are at present declining. In one child, who had been previously affected with the Hooping-cough, the rash was succeeded by numerous livid spots, diffused over nearly the whole body, and resembling those of the Purpura, or the Petechiæ sine febre, in their most dangerous form. No harm, however, ensued; and the complaint was removed in about eight days.

The Scarlatina has, during the last three weeks, become much milder; so that all the cases put down, terminated early and favourably.

Inflammation of the eyes, next to Catarrh, Cough, and Rheumatism, seems to have been the most general disease. It was very troublesome; and, in many cases, of long duration. The same complaint occurred epide-

mically in the months of February, March, and April, of the last year. (See page 255.)

It may not be amiss to observe, that the Itch, which is usually rife in the spring-season, has, during the last six weeks, taken a very wide range, and appeared in many respectable families, never before liable to its visitations.

Many cases of the Porrigo having been noted in the two preceding months, I think it proper here to remark, that under this generic term are comprized the Achores, Favi, Scabies capitis, and Crusta lactea, described by medical writers, and often considered separately. The word Tinea, employed in nearly the same signification as Porrigo, is an Arabic term corrupted, and should therefore be banished from professional language; more especially as we have an appropriate classical term handed down to us from the highest authority:—" Porrigo autem est, ubi inter pilos quædam quasi squamulæ surgunt; eæque a cute resolvuntur; et interdum madent, multo sæpius siccæ sunt. Idque evenit modò sine ulcere, modò exulcerato loco. Huic quoque modò malo odore, modò nullo accedente. Fereque id in capillo fit, rariùs in

barbâ, aliquando etiam in supercilio*."—To this account may be added, that the disease is contagious†; and that its pustules often extend from the scalp to various parts of the body. Hence it has been confounded with the Itch, from which, however, it is distinguishable by the form, contents, and distribution, of the pustules.

The term Impetigo applies only to the first species of the disease so denominated by Celsus:—"Quæ similitudine Scabiem repræsentat; nam et rubet, et durior est, et exulcerat, et rodit: . . . videnturque esse in eâ quasi bullulæ quædam, ex quibus, interposito tempore, quasi squamulæ solvuntur‡."—He distinguishes another complaint, somewhat simi-

* Cels. de Medicin. lib. vi. cap. 2.

† From this part of the definition of Porrigo as a genus, it is necessary to exclude one of the species, the Crusta lactea, or Porrigo larvalis, of the author's classification. This disorder is certainly not contagious, and, unlike the other species, is little under the controul of external remedies. Dr. Bateman has suggested that the Crusta lactea might with greater propriety be referred to the genus Impetigo; and he has pointed out several particulars in which it bears a resemblance to that disease. See his Synopsis of Cutaneous Diseases, 5th edit. p. 160, note.—A. S.

‡ Cels. lib. v. cap. 28. § 17.

lar, but with larger pustules,—"Distat autem ab eâ quæ magis exulcerata est, et varis similes pustulas habet."—This probably refers to the Ecthyma, a disease frequently noted in the foregoing pages, and which is characterized by an eruption of inflamed pustules, termed, by the Greeks, Phlyzacia *, appearing mostly on the extremities; but neither contagious nor attended with fever.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of April to the 20th of May.

List of the Cases which occurred in my own Practice.

FEBRILE DISEASES.

Catarrh	13	Febrile Diseases of Infants	9
Acute Rheumatism	5	Aphthous Sore-throat	3
Hooping-cough	6	Hæmoptoë	1
Measles	5	Hæmatemesis	1
Scarlatina	4		
Chicken-pox	1		
Contagious, malignant Fever	3	Quotidian	1
Slow Fever	4	Tertian	1
Child-bed Fever	3	Hectic	5

* Hippocr. Prænot. Coac. § 2.—Compare Cels. lib. v. cap. 28. § 15.

CHRONIC DISEASES.

Cough and Dyspnœa...36	Menorrhœa 5
Pulmonary Consumption, 7	Abortion 2
Pleurodyne..... 4	Fluor albus..... 2
Chronic Rheumatism...15	Dysury and Gravel..... 3
Asthenia.....21	Hæmorrhoids 2
Dropsy..... 7	Tabes mesenterica..... 6
Scrophula..... 5	Scirrhus 4
Rachitis 2	Tooth-rash, &c..... 6
Cephalæa 8	Itch and Prurigo.....15
Epilepsy 1	Lepra and Scaly Tetter, 5
Vertigo..... 2	Intertrigo..... 2
Dyspepsia.....10	Acne..... 5
Pains of the stomach and bowels.....14	Nettle-rash..... 1
Diarrhœa..... 6	Purpura..... 2
Constipation..... 2	Erythema..... 1
Chlorosis, &c. 7	Porrigo..... 8

From the 20th of April to the middle of May the atmosphere was chill, damp, and cloudy, the wind being mostly north, north-east, and north-west. The prevailing diseases were Coughs, Catarrh, Rheumatism, Hooping-cough, and Measles. All the cases of Measles, as well as of the Scarlatina, and Malignant Fever, terminated favourably. One patient, two years old, died in the febrile stage of the Hooping-cough, which, at this season of the year, seldom happens. The

case of Hæmorrhagy from the stomach and bowels proved fatal within two days, many quarts of black blood being discharged by frequent and violent fits of vomiting.

The disease entitled Chlorosis is attended with paleness and emaciation, depraved appetite, suppression or non-appearance of the catamenia, pains of the stomach and limbs, with anasarca; fixed pains of the head, difficulty of breathing, &c. Young females are often affected with it, who follow a sedentary occupation in close streets, or narrow, crowded tenements, and seldom enjoy the benefit of fresh air. The disorder is not, however, confined to this class of people. We cannot be surprised that young ladies, of the highest rank, should suffer equally: eight months of the year they sit on thick carpets, in close rooms, heated by register-stoves; have large fires kept in their bed-rooms, never stir out except in carriages, and are often too much restricted in their diet. The weakness and extreme irritability, induced by this mode of living, not only brings on the Chlorotic state, but, after the slightest exposure to damp, or cold air, renders them also liable to be affected with Pains and Inflammations of the bowels, Rheumatism, Head-ache, Catarrh, Phthisis, &c. more especially as, in the

article of dress at that period of life, health is always sacrificed to fashion*.

An effectual remedy for Chlorosis, but more so when assisted by exercise, and a proper regimen, is the solution of green vitriol, with fixed alcali and myrrh, recommended by the late Dr. Griffiths. The result of this compound is a precipitation of iron from the vitriol, and the formation of a neutral salt. As the medicine, in a liquid form, is generally found offensive to the stomach, it must appear desirable to obtain separately the precipitate, which may be afterwards combined at pleasure with the salt, with myrrh, or any other ingredient, and made into pills. Such

* The above account of the influence exercised on health by the habits of the upper ranks of society, coincides with the statement of Dr. George Fordyce on the same subject: —"The women of this (the higher) class, live almost constantly in their houses, which are very close, although the rooms are spacious, and the whole house perfectly clean and neat; or in carriages, with no labour and little exercise. This gives them a delicacy in their appearance hardly to be described. As a flower brought forward by the cherishing heat of a conservatory, where it is defended from the nipping winds, exceeds any thing produced by nature alone, like it they too have a tenderness of constitution, which subjects them to disease from the slightest exposure to any cause." See an 'Attempt to improve the Science of Medicine,' in the Transactions of a Society for the Improvement of Medical and Chirurgical Knowledge, Vol. I. p. 256.—A. S.

a preparation of Iron I have been in the habit of prescribing ever since the year 1783, and believe that all medical practitioners, after having once given it a fair trial, would be disposed to employ it more frequently than any other chalybeate*. An opportunity of experiencing its good effects is afforded to every one, as it may now be had of the principal chemists in London: it is also prepared with great accuracy at Apothecaries' Hall, and sold there under the title of Ferrum præcipitatum †. For the following observations, respecting this preparation, I am obliged to Mr. Francis Moore, the ingenious chemical operator at the Hall. (See Report, Oct. 1799.)

" I have repeatedly made the ferrum

* The chalybeate medicine here recommended to the notice of the Profession, was received, with some slight variation in the mode of preparation, into the London Pharmacopœia of 1809 under the name of *ferri carbonas* (the *ferri sub-carbonas* of the Pharmacopœia published in 1815). For some further remarks on the ferrum præcipitatum, see above, p. 319.—A. S.

† Pills made of the unwashed precipitate, combined with myrrh, have been advertised and sold as a nostrum. I am sorry to notice a circumstance so disgraceful to the medical profession, but must observe, that the above prescription was communicated, some years ago, to the vender of the pills, by a Fellow of the London College of Physicians, under whose name the medicine is, I believe, yet sold and recommended to public attention.

præcipitatum from Dr. Griffiths's valuable medicine, which is a carbonated oxyd of iron, mixed with sulphat of potash. The following process appears to me the best, and affords a very beautiful preparation, viz. Twelve pounds of sulphat of iron (green vitriol) are dissolved in twenty-four gallons of distilled water, with the addition of eight ounces of sulphuric acid, which greatly accelerates and assists the solution of it. About twelve pounds of kali præp. are to be added, or more, till no farther precipitation is visible, care being taken not to put in too much kali, as it redissolves a small proportion of the iron. The precipitate must then be washed with a quantity of hot distilled water, sufficient to dissolve all the sulphat of potash formed, and is afterwards to be carefully dried for use.—I prefer the precipitate obtained without heat, considering it as more carbonated and likely to agree better with the stomach. This mode affords one-twelfth of precipitate more than when made with hot water, but the colour is less beautiful, and it dries of a gritty or brittle consistence.—The excess of sulphuric acid is used as a medium to carbonate the iron, as well as assist the solution at first, by the carbonic acid which it disengages from the kali in its combination."

ACCOUNT OF DISEASES IN LONDON,

From the 20th of May to the 20th of June.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Measles	11	Zona herpetica	1
Hooping-cough	3	Synochus, or Summer Fever	6
Scarlatina	2	Contagious, malignant Fever	6
Catarrh	8	Apoplexy	2
Acute Rheumatism	6	Epistaxis	3
Rheumatic pains of the face and jaw	5	Hæmoptoë	4
Inflammatory Sore-throat,	4	Hæmatemesis	2
Aphthous Sore-throat	3	Intestinal Hæmorrhagy	2
Angina parotidæa	1	Renal Hæmorrhagy	2
Pneumonic Inflammation,	4	Slow Fever	2
Inflammation of the bowels	1	Child-bed and Milk Fevers	3
Peritoneal Inflammation,	3	Acute Diseases of Infants	12
Hepatitis	1		
Nephritis	1	Tertian	1
Volvulus	1	Hectica	3
Ophthalmia	3		
Otalgia	1		
Erysipelas	2		

CHRONIC DISEASES.

Asthenia	43	Chronic Rheumatism	20
Cough and Dyspnœa	31	Lumbago and Sciatica	7

Pleurodyne	4	Emansio	2
Pulmonary Consumption,	12	Scirrhus uteri	1
Cephalæa	6	Scirrhus of the liver	2
Epilepsy	2	Dropsy	3
Chorea	1	Struma	6
Paralysis	2	Tabes mesenterica	4
Dyspepsia	11	Hydrocephalus	1
Gastrodynia	7	Worms	3
Enterodynia	5	Hæmorrhoids	2
Bilious vomiting, and Diarrhœa	12	Prolapsus ani	1
Jaundice	3	Scaly Tetter	4
Gravel, Stone, &c.	4	Nettle-rash	1
Chlorosis	4	Pompholyx	1
Menorrhœa	8	Impetigo	3
Abortion	3	Ecthyma	2
Amenorrhœa	4	Itch and Prurigo	12
Fluor albus	3	Gutta rosacea	4
		Porrigo	3

The series of incongruous complaints, stated in the above list, is an usual effect, in our climate, of hot sun-shine, counteracted by the sharp east and north-east winds, which mostly prevail from the commencement of spring till the summer solstice. Indeed, the diseases of winter, spring, and summer, seem to have been crowded together within the last six weeks, and have kept medical practitioners almost constantly engaged.

Among contagious, epidemic disorders, the Measles have lately taken the lead; but,

from an inspection of the list, it will appear, that inflammatory and hæmorrhagic complaints formed the most extensive set of acute diseases; the latter series being particularly violent and obstinate, and, in many instances, fatal.

The cases of Renal Hæmorrhagy were attended with nearly the same sensations as are felt in Nephritis. Blood was discharged along with the urine for eight or ten days. Small coagula were also frequently passed with very considerable pain. The disease, entitled Hæmaturia in many preceding lists of complaints, differs from the Renal Hæmorrhagy which occurred this month, in being wholly without fever. It mostly affects boys, and has many returns; but neither occasions pain of the loins, nor any particular uneasiness.

The Angina parotidæa (Mumps or Branks) affected a young man, 26 years of age. When his testicle was swelled and inflamed, as usual on the fifth day of the disease, he became delirious, sometimes comatose, had a weak pulse, a dry, brown tongue, and other symptoms of a malignant Fever. The case, though alarming in its appearance, terminated favourably on the fourteenth day. I do not think this disease, during the last twenty

years, has ever been epidemic and contagious, as stated by Dr. Russell*.

In the case of Hepatitis the peritoneal covering of the liver, on its upper side, seemed to be the part chiefly affected. The edge of the liver was hard, and painful when pressed. The tongue was covered with a whitish fur; the pulse was languid, and not frequent; the patient was rather costive, but had no vomitings. He referred his complaint to drinking cold water after being much heated with work. The whole duration of the disease was three weeks; the pain, and tumor, and hardness, gradually yielding to the repeated application of leeches, with the use of calomel and sal catharticus amarus.

Intermittents, so far as my knowledge has extended, have not, any time within twenty years, been epidemic in London: their number in all the foregoing lists must indeed appear remarkably small. Dr. Sydenham †

* "Angina hæc ex epidemicis una est et contagiosa, et per totas domus grassari solet, nisi anteà fortassè juvenes eodem morbo laboraverint." Dr. Russell has given an enlarged account of this disease in his treatise, de Morbis Glandularum, page 115. He also relates a case, attended with violent fever and delirium, which proved fatal: the patient had been twice bled: the other remedies employed for him were blisters, purgatives, and nitre, page 117.

† Constitutio epidemica Annorum 1661, 62, 63, 64, Londini.

mentions them, as, in his time, frequent and inveterate; and Dr. Fothergill, not fifty years ago, has marked their regular occurrence every spring and autumn *. Whence can arise this difference? I am disposed to refer it to the practice of draining, and to the improved modes of cultivating † land in Essex, Kent, and some other adjoining counties, from which either agues were formerly imported, or the effluvia causing them were conveyed by particular winds, not to any change which the air of London itself has undergone.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of June to the 20th of July.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Scarlatina anginosa	7	Chicken-pox	1
Measles	6	Hooping-cough	2
Small-pox	2	Acute Rheumatism	7

* On Weather and Diseases, May and September, 1751; April and June, 1753; June and September, 1754.

† Dr. Gregory, in his lectures, was in the habit of ascribing to the operation of similar causes the disappearance of Intermittent Fevers from different districts, the county of Berwick in particular, where they formerly prevailed extensively.—A. S.

Contagious, malignant Fever 3
Catarrh 5
Ophthalmia 3
Inflammatory Sore-throat, 3
Aphthous Sore-throat ... 4
Pneumonic Inflammation, 1
Inflammation of the bowels 2
Peritoneal Inflammation, 1
Hæmorrhagy from the bowels 2
Hæmorrhagy from the lungs 7
Renal Hæmorrhagy 1
Epistaxis 2
Synochus, or Summer Fever 6
Child-bed and Milk Fever 3
Febrile Diseases of Infants 9
Hectica 6

CHRONIC DISEASES.

Cough and Dyspnœa 32
Pleuritic Stitches 2
Pulmonary Consumption, 7
Chronic Rheumatism 11
Lumbago and Sciatica ... 6
Asthenia 25
Paralysis 4
Head-ache and Vertigo .. 6
Melancholia 3
Chorea 1
Hysteria 1
Diarrhœa and Bilious vomiting 18
Dyspepsia 11
Gastrodynia 10
Enterodynia 6
Devonshire Colic 2
Chlorosis and Amenorrhœa 4
Menorrhœa 5
Abortus 2
Fluor albus 5
Dysury 3
Ischuria 7
Enuresis 1
Tabes mesenterica 6
Dropsy 9
Struma 5
Worms 3
Rickets 3
Jaundice 4
Scirrhus of the liver 1
Scirrhus of the uterus ... 1
Stone and Gravel 3
Itch and Prurigo 7
Lepra 1
Scaly Tetter 2
Lichen 2
Impetigo 1
Eczema 1
Ecthyma 3
Porrigo 2
Acne 2

Much rain fell at the latter end of June, and in the month of July: the wind was variable, but mostly west, south-west, west-south-west, and south-south-west. In consequence of the chill, and moist state of the air, inflammatory complaints still bore a large proportion to infectious and other acute diseases. The disposition to Hæmorrhagy has also continued with the same effects as were stated in the last report.

All the cases of Scarlatina, Measles, Fever, and Hooping-cough, terminated favourably. I am sorry to suggest the possibility that the Measles may occur twice in the same person, but have little doubt of it from a circumstance which took place in the present month. Two children, under seven years of age, had the disease very severely from a female servant who was taken ill after her entrance on duty at the house. No precaution was observed respecting the children, whom I myself had attended through the measles under a mild form, in July 1797. They then received the infection from a girl who came to spend with them the Midsummer vacation from a school, where the young ladies had been generally affected with the disease. Similar instances have been occasionally mentioned

to me by practitioners, but I remained somewhat incredulous, till staggered, or rather convinced, by the cases above-mentioned. It may not be amiss to remark, that one of the children had the Scarlatina two years before. The only conclusion I can at present draw from these cases is, that the eruption*, if merely attended with watery eyes and a sensation of roughness in the throat, is not always sufficient to prevent a return of

* The recurrence of Measles is probably more rare than that of Small-pox, and some other contagions which usually affect individuals only once. Dr. Willan states, that after having given his attention for more than twenty years to eruptive complaints, he never met with a person who had twice had the *febrile* Rubeola; and he cites the testimony of Rosenstein to the same effect. (On Cutaneous Diseases, page 235.)

Dr. Baillie attended in two families, the members of which were unequivocally affected a second time with the disease; in three cases it recurred within four months from the first attack; in five others the interval was six months; and in one case, twenty-one years. The individuals affected had all the common symptoms of the disease, which in two of them was more severe than usual. See Transactions of a Society for the Improvement of Medical and Chirurgical Knowledge, Vol. III. pp. 258-267.

Dr. Bateman mentions two cases of the same kind, (Reports on Diseases, page 276,) but the evidence in regard to them is less complete and satisfactory than in those recorded by Dr. Baillie.—A. S.

the complaint afterwards, with severe cough, hoarseness, difficulty of breathing, and a violent disorder of the constitution.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of July to the 20th of August.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Measles	9	Slow Fever and Hectic,	4
Scarlatina	1	Catarrh	6
Small-pox	1	Acute Rheumatism	2
Hooping-cough	3	Erysipelas	1
Contagious, malignant Fever	7	Inflammatory Sore-throat,	3
Synochus, or Summer Fever	4	Child-bed and Milk Fevers	3
Cholera	1	Acute Diseases of Infants,	8

CHRONIC DISEASES.

Asthenia	28	Cough and Dyspnœa	15
Chronic Rheumatism	10	Hæmoptoë	2
Dropsy	8	Pleurodyne	1
Paralysis	2	Pulmonary Consumption,	5
Apoplexy	1	Dyspepsia	12
Cephalæa	5	Gastrodynia	7
Hysteria	2	Pyrosis	2
Epilepsy	1	Enterodynia	5

Diarrhœa	13	Struma	4
Bilious vomiting	3	Tabes mesenterica	2
Colica Pictonum	1	Lichen	2
Hæmorrhoids	4	Lepra	1
Fluor albus	5	Scaly Tetter	3
Menorrhœa	5	Urticaria	1
Chlorosis, &c.	7	Roseola	1
Jaundice	2	Erythema	1
Scirrhus of the liver	1	Shingles	1
Scirrhus of the womb	2	Itch and Prurigo	13
Prolapsus	1	Porrigo	2
Dysury	1	Acne	3
Worms	2	Lupus	1
Rickets	3		

The long continuance of wet and cold weather has not produced, in the course of the two last months, any considerable extension of diseases. No complaint was so general as the Measles, which have spread more widely since the solstice. The disease has however appeared in a very mild form, as it often does in the summer months, with but a slight cough, and a moderate degree of fever.

The Malignant, contagious Fevers occurred in the close and crowded dwellings of the poor. That the number of them should be greater than usual might be partly owing to the long series of damp and windy days, which confined most of the individuals of

families at home, and prevented ventilation by open windows, &c. Nevertheless, induction, from the experience of many years, enables me to ascertain, that mild open winters*, and chill, even though moist summers,

* The comparative effects produced by mild and severe winters upon the health of the inhabitants of London, are strikingly pourtrayed by Dr. W. Heberden, in the Philosophical Transactions (Vol. lxxxvi, pp. 279-284). His concluding admonitions respecting the pernicious influence of extreme degrees of cold upon the human body, cannot be too highly appreciated or too extensively circulated: "Every physician in London, and every apothecary, can add his testimony, that their business among all ranks of people never fails to increase and to decrease with the frost. For if there be any whose lungs are tender, any whose constitution has been impaired either by age, or by intemperance, or by disease, he will be very liable to have all his complaints increased, and all his infirmities aggravated by such a season. Nor must the young and active think themselves quite secure, or fancy their health will be confirmed by imprudently exposing themselves. The stoutest man may meet with impediments to his recovery from accidents otherwise inconsiderable; or may contract inflammation or coughs, and lay the foundation of the severest ills. In a country where the prevailing complaints among all orders of people are colds, coughs, consumptions, and rheumatisms, no prudent man can surely suppose that unnecessary exposure to an inclement sky; that priding one's self upon going without any additional clothing in the severest winter; that inuring one's self to be hardy, at a time that demands our cherishing the firmest constitution lest it suffer; that

are, on the whole, most favourable to the health of the inhabitants of London. In confirmation of this remark, I beg leave to quote Dr. Fothergill's "Observations on Weather and Diseases, November 1751."—"The conclusion of the last and the beginning of the present month were moderate, and the weekly Bills of Mortality very little affected. After the cold and frosty weather set in, the burials increased from 319 to 395, and kept up nearly to the same number the week following. A more temperate, moist season succeeding, reduced them to 338. It has been frequently observed, and, as far as the Bills may be depended on, is demonstrable, that an excess of wet, with moderate warmth, is not so injurious to our constitutions, as a severe cold season."

braving the winds, and challenging the rudest efforts of the seasons, can ever be generally useful to Englishmen. But if generally, and upon the whole, it be inexpedient, then ought every one for himself to take care that he be not the sufferer. For many doctrines very importantly erroneous; many remedies either vain, or even noxious, are daily imposed upon the world for want of attention to this great truth; that it is from general effects only, and those founded upon extensive experience, that any maxim to which each individual may with confidence defer, can possibly be established."—A. S.

He farther remarks, in the report for December 1757, "From comparing the accounts of the weather given in the preceding months, it will appear, that the seasons, excepting a greater tendency to rain than has happened for several years past, have been uncommonly moderate; no extremes of heat or cold, nor any great or sudden changes, in respect to either of these qualities. This may, perhaps, in a great measure, have contributed to the healthiness of the year in this metropolis, it having been before observed, that no weather is in common so little productive of acute and fatal diseases, as the warm and the moist, nor any so dangerous, in these respects, as the opposite."

ACCOUNT OF DISEASES IN LONDON,

From the 20th of August to the 20th of September.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Contagious, malignant Fever	19	Hooping-cough	3
Measles	14	Catarrh	10
Scarlatina	2	Pneumonic Inflammation,	4
Small-pox	4	Acute Rheumatism	3
		Erysipelas	1

Epistaxis	1	Cholera	2
Hæmoptoë	2	Slow Fever	5
Hæmatemesis	1	Acute Diseases of Infants,	15
Intestinal Hæmorrhagy,	1	Child-bed and Milk Fevers	3
Hepatitis	1	Aphthous Fever	2
Enteritis	2	Hydrophobia	1
Synochus, or Summer Fever	12	Hectica	4

CHRONIC DISEASES.

Cough and Dyspnœa	26	Fluor albus	4
Phthisis pulmonalis	10	Menorrhœa	3
Pleurodyne	1	Prolapsus uteri	1
Chronic Rheumatism	5	Scirrhus of the uterus	2
Asthenia	19	Scirrhus of the liver	1
Anasarca	8	Jaundice	4
Paralysis	2	Tabes mesenterica	3
Dyspepsia	20	Worms	3
Gastrodynia	11	Dysury and Gravel	5
Enterodynia, and Colic,	10	Lepra	3
Constipatio	3	Shingles	2
Bilious vomiting, and Diarrhœa	22	Nettle-rash	1
Chlorosis and Amenorrhœa	15	Erythema	1
		Itch	6
		Porrigo	3

The number of Contagious Fevers has been much increased during the month of September, either from a continuance of the causes assigned in the last report, or from the general influence of the autumnal season on the human body, by which it is rendered more than usually susceptible of almost every

species of infection (see page 217). This effect appears from the proportion of Fevers to other acute diseases stated in the above list, and is farther proved by the observation of practitioners differently stationed; all of whom agree, that, along with Malignant Fevers, the Measles, Small-pox, Scarlatina, &c. have begun to spread rapidly and widely.

Persons, much exposed to the vicissitudes of the atmosphere, were affected with the Synochus, with Erysipelas, pneumonic Inflammation, Diarrhœa, Cholera, and violent Pains, or Inflammation of the bowels, diseases which have been attended with considerable danger, and, in many instances, fatal. In one of the cases of Summer Fever, which did not at first seem alarming, a rash suddenly appeared on the neck and arms, before the end of the first week; livid spots, with a dry, brown tongue, succeeded: the patient became tremulous, confused in his ideas, and unable to articulate: he died on the third day from the commencement of these symptoms (see page 163). A case of Inflammation of the bowels likewise terminated fatally on the second day.

Jaundice frequently occurs at this season

of the year, unattended by any considerable pain, or fever; and seems rather owing to an increase of the biliary secretion than to a stoppage of the ducts from the liver, the feces being tinged with bile in the usual manner. Saline purgatives, or a few doses of calomel, presently remove this complaint, which affects children as well as adults.

The case of Hydrophobia occurred about the middle of August: the patient, a fine boy, ten years old, had been bitten by a dog, in Fetter-lane, six weeks before the dread of water commenced. As he lived no more than two days after the appearance of this symptom, I had only an opportunity of paying him a single visit. His pulse was then hurried and irregular; his manner confused and agitated; his utterance rapid and abrupt; his eyes appeared bright and sparkling, and had a mixed expression of wildness and anxiety. He was perpetually hawking up some frothy phlegm, which seemed to irritate the larynx. When a glass of water was presented to him, a rattling and convulsive motion took place in his throat, rendering deglutition impracticable: the water, whether applied to his lips, or merely put in his sight, seemed to

excite every mark of consternation and horror. All the above symptoms could, however, be produced by other means as strongly as by the application of liquids. When the attending surgeon attempted, without any objection made by the patient, to examine the state of the tonsils, &c. the spoon no sooner approached his teeth, than the muscles of the throat were thrown into violent action, and he made a noise, which was aptly enough compared, by those around him, to the snarling of a fierce dog about to receive chastisement. At the time of our visit to this wretched boy, he was more composed than he had been through the preceding night. He had, we were informed, had repeated fits of raving, in which he became almost unmanageable, and endeavoured to bite the hands of those who held him. In the evening after we saw him, he began to complain of pain in the head, and of violent pains in the stomach and bowels: his fever and other symptoms appeared to increase; and, after enduring dreadful agony for several hours, he expired about two o'clock in the morning. The body was examined by an attentive and accurate observer, Mr. Whately, surgeon, of

Bedford-row, to whom I am obliged for the following detail of the appearances after death:

"On opening the abdomen, all its contents appeared to be in a sound state, except the spleen, which adhered to all the parts with which it lies in contact; and was smaller, and more convex, on its external side, than it is usually found to be. These appearances in the spleen had been evidently produced by an inflammation of that organ, some time before the illness which was the immediate cause of the patient's death. From its external appearance, the stomach would have been thought free from disease; but, when it was opened, the whole of its villous coat was found to be greatly inflamed. The greatest degree of this inflammation was at the large extremity of the stomach, and particularly about the cardia, around which, to the extent of two or three inches, the villous coat was abraded. The inflammation did not extend to any part of the intestinal canal: it ceased at the pylorus; but it was continued from the cardia, along the œsophagus, to the pharynx. About two inches of the internal coat of that part of the œsophagus which

joins to the cardia, were also abraded. The inflammation upon the œsophagus was not confined merely to its internal surface, but reached to its external coat, on which it was likewise continued through its whole extent; and, in different parts of the cellular membrane adjoining to it, small quantities of effused blood were found. The pharynx was very slightly inflamed. The uvula, palatum molle, and tonsils, were entirely free from inflammation. The left lung was of a more solid texture, of a darker colour, and fuller of blood, than it is ever found to be in its natural state; all which circumstances may be considered as the effects of inflammation. About three or four ounces of bloody water were found in the right cavity of the chest. There was likewise a slight inflammation on the internal membrane of the trachea; but it ceased near the larynx, which, with the epiglottis, was entirely free from inflammation. There was some inflammation on the external surface of the heart, but it did not extend to the inner surface of the ventricles."

ACCOUNT OF DISEASES IN LONDON,

From the 20th of September to the 20th of October.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Contagious, malignant Fever 13	Hæmoptoë 1
Measles 5	Intestinal Hæmorrhagy, 1
Small-pox 2	Enteritis 1
Scarlet Fever 4	Cholera 1
Hooping-cough 6	Slow Fever 1
Catarrh and Pneumonia, 13	Abortus and Menorrhagia, 6
Acute Rheumatism 2	Child-bed, and Milk Fevers 5
Ophthalmia 3	Acute Diseases of Infants, 11
Erysipelas 1	
Epistaxis 1	Hectic 3

CHRONIC DISEASES.

Cough and Dyspnœa ... 20	Gastrodynia 10
Phthisis pulmonalis 8	Enterodynia 6
Chronic Rheumatism ... 5	Diarrhœa, and Bilious vomiting 14
Asthenia 24	Chlorosis, and Amenorrhœa 7
Dropsy 6	Ischuria 1
Struma 3	Enuresis 1
Cephalæa 8	Fluor albus 3
Hysteria 2	Cancer 1
Epilepsy 1	Tabes mesenterica 2
Hydrocephalus 2	
Dyspepsia 16	

Worms	2	Shingles	1
Hernia	2	Impetigo	1
Prolapsus uteri	1	Acne	1
Scirrhus of the liver	1	Lupus	1
Jaundice	1	Erythema	2
Stricture of the Œsophagus	1	Purpura	1
Itch	6	Porrigo	5
Prurigo	2	Thrush	4
Nettle-rash	2	Anthrax	1

The train of diseases which has occurred during the present month differs but little from that in the preceding one. In the cases of Scarlatina anginosa, both of which were violent, and one fatal, the rash re-appeared on the fourteenth day of the disease, that is, seven or eight days after the decline of the primary eruption, and went a second time through the usual course, terminating by a fresh desquamation (see page 191). In one case I remember to have observed the same appearance a third time, about the twentieth day of the disorder: whenever it occurs, it marks a lingering and virulent distemper.

The cases of Bilious vomiting, which have been often put down in the summer months, are not of any certain duration, nor attended with much fever: indeed the pulse is, for the most part, remarkably slow. Some cases

are attended with Syncope, or repeated fits of Fainting. Dr. Fothergill's remarks on this subject are so correct that little can be added to them: " September, 1752. Many have been seized with pains about the region of the stomach, attended with sickness, vomiting of green, porraceous bile, and costiveness. Shiverings, lassitude, and pain in the limbs, often accompanied the first attack; in some, the least attempt to raise the head from the pillow produced a tendency to vomiting. The heat in most was moderate: the pulse small, and seldom quick. Small doses of the saline mixture, made quite neutral*, with absorbents, and a few drops of Tinct. Thebaic. commonly took off the disposition to vomiting in a short time, and a dose of rhubarb, or hiera picra, then was retained, and gave effectual relief.

" Emetics, though of the mildest kind, seemed not to be of the use one might have expected. The pain often seemed to be increased afterwards; the tendency to vomiting became more continual; the lassitude, restlessness, and proneness to vomit, upon motion,

* The saline draught, in the same combination, is preferable when taken during the state of effervescence.

more troublesome; and the difficulty of procuring the necessary discharges downwards increased."

Cases of Scrophula, Rickets, and Tabes mesenterica, are numerous among children in the upper ranks of society, owing sometimes to too much indulgence, under the circumstances mentioned page 293, sometimes to an opposite extreme, adopted with an idea of giving hardness to the constitution by violent exercise, thin clothing, and a coarse or spare diet. Among children of the lower class, these disorders become inveterate and fatal, through confinement, bad air, want of cleanliness, and improper diet, in the situations hereafter described. (See the report for March 1800.) If their exciting causes can be to any extent obviated, one of the best remedies for such complaints is the precipitate of iron* before recommended; page 295. The pow-

* The precipitate made with cold water, as mentioned, page 296, though less striking in its appearance than that prepared with hot water, is, I believe, preferable, being more carbonated, and having a closer affinity with Dr. Griffiths's chalybeate medicine, for which it is intended as a substitute. However, both the preparations are kept at Apothecaries' Hall: their respective advantages may therefore be ascertained by those who are willing to make the trial.

der, combined with a neutral salt, with the fossil alcali, or with rhubarb, so proportioned as to act moderately on the bowels, is particularly useful to infants and children, who, along with general debility, paleness, and emaciation, have the head and abdomen enormously swelled. For infants, the dose of the powder is five grains, which may be taken in honey, or mixed with the conserve of oranges. Adults take from eight to fifteen grains without inconvenience, and experience certain relief, under the state of Asthenia, Dropsy, Chlorosis, &c.; and during convalescence from Hectic, Slow Fever, Rheumatism, and Scarlatina anginosa.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of October to the 20th of November.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Contagious, malignant Fever	22	Slow Fever	3
Scarlet Fever	15	Peripneumony	3
Measles	12	Peritoneal Inflammation,	2
Catarrh	18	Acute Rheumatism	7
		Ophthalmia	2

Angina	2	Child-bed and Milk Fevers	5
Enteritis	1		
Erysipelas	1		
Acute Diseases of Infants,	8	Hectic	4
Hooping-cough	3		

CHRONIC DISEASES.

Cough and Dyspnœa	32	Worms	2
Hæmoptoë	3	Menorrhœa	2
Pulmonary Consumption,	6	Fluor albus	3
Pleurodyne	3	Prolapsus uteri	1
Chronic Rheumatism	14	Scirrhus uteri	2
Asthenia	16	Gravel and Dysury	3
Dropsy	6	Scirrhus of the liver	1
Cephalæa	4	Jaundice	2
Vertigo	2	Tabes mesenterica	2
Epilepsy	3	Rickets	4
Hysteria	1	Struma	6
Palsy	2	Lepra	2
Hydrocephalus	1	Itch and Prurigo	10
Palpitatio	1	Impetigo	3
Dyspepsia	11	Nettle-rash	1
Gastrodynia	7	Herpes	1
Hæmatemesis	2	Acne	5
Bilious vomiting and Diarrhœa	13	Dandriff	2
Enterodynia	5	Porrigo	3
Hæmorrhoids	3	Erythema	1
Chlorosis and Amenorrhœa	11	Purpura	1
		Lupus	1

The Measles, though extensively diffused, have continued mild and moderate. The Scarlet Fever has increased, since the last Re-

port, both in extent and in the violence of its symptoms*: but the Contagious malignant Fever has been the most frequent, as well as the most fatal, of all acute diseases. Of the number specified in the lists for the present and preceding month, ten patients died; whereas, the usual proportion of deaths from this Fever, westward of Temple-bar, is one in seventeen or eighteen cases. The habitations of the poor, within or adjoining to the city, have suffered greatly; and some, I am informed, have been almost depopulated, the infection having extended to every inmate. The rumour of a Plague was totally devoid of foundation. One of the persons, said to have been affected with it from opening some bales of prize-cotton, died with the usual symptoms of a Peripneumony. It was afterwards ascertained, by anatomical dissection, that his death was occasioned by a violent Inflammation of the lungs, which originated from in-

* An observation, made by Dr. Fothergill, respecting an enlargement of the Parotid Glands in this disease, was, during the present month, repeatedly verified:—"Both children and adults had sometimes large hard tumours on each side of the neck externally: where these appeared early, and were very large, the sick were in great danger; and, if they recovered, the amendment was slow and tedious."—On Weather and Diseases, Oct. 1751.

temperance in drinking, and exposure to a cold and damp air at an unseasonable time of the night.

The Contagious malignant Fever was, in September, attended with a dull pain of the head, great debility, or sense of lassitude, and pains referred to the bones, tremblings, restlessness, with slight delirium, a querulous tone of voice, a small and frequent pulse, heat of the skin, thirst, and a fur upon the tongue, first of a dirty white colour, but turning, in the latter stage of the disease, to a yellowish brown. In this form the Fever continued thirteen days without any dangerous symptom, and then suddenly disappeared, leaving the patient, for some time after, languid and dispirited. All the individuals of a family were successively affected with the same train of symptoms; many of them so slightly as not to be much confined to their beds. To a contagious Fever alone, under this mild form, Dr. Cullen, preserving a strict analogy, should have applied the denomination of Typhus mitior. He has improperly comprized under it the slow or nervous Fever described by Huxham and Gilchrist, which may rather be considered as a species of

Hectic, and is not received by infection. (See page 132.)

In October and November, the disease, as is usual, assumed its more dangerous form. The pain of the head was at first excruciating, and attended with great confusion of ideas: a total loss of strength suddenly took place; and the limbs felt sore, as if they had been all over bruised. The pulse was weak and irregular: a thick sordid brown fur covered all the upper part of the tongue; the tongue itself became hard, dry, and almost immovable; and the teeth were covered with a brown or black crust. There was a smarting or burning heat of the skin, which conveyed an unpleasant, benumbing sensation to the fingers and wrist of the practitioner who felt the pulse. The eyes were frequently suffused: the head-ache terminated, during the second week, in coma or stupor, with great insensibility, deafness, &c. These symptoms were, however, more favourable than a state of agitation and watchfulness. In the fatal cases, there occurred, a few hours before death, a laborious respiration, with a fluttering, irregular pulse, difficulty of swallowing, and sometimes hiccough. A favourable crisis

was made by sweating, accompanied, in some instances, by a sensation of coldness. A diarrhœa took place only in one patient. The critical days seemed to be the seventh, the twelfth, the fourteenth, the seventeenth, and the twenty-first; but the most numerous crises were on the twelfth and fourteenth. The changes, whether for recovery or death, took place very suddenly*. I did not observe petechial spots in any of the cases; nor the alternations of cold shiverings with flushes of heat, which most practical writers describe as the primary symptoms of malignant Fever.

It will not, perhaps, be disagreeable to my readers that I should exhibit the following table of critical days, made from a hundred and twenty cases of Malignant contagious Fever, in which the beginning and termination could be distinctly marked. Let it, however, be understood, that the cases were noted at different seasons of the year, and not put down in the order of succession. I may observe farther, that the table of crises here

* Although the total absence of fever was not noticed by the medical attendants till on the days put down, it yet appeared, on a strict investigation, that, in some patients, the tongue became moist; and that the heat, delirium, &c. were removed in the course of the preceding evenings or nights.

given cannot be supposed to coincide with the observations on the subject made by Hippocrates, Aëtius, Galen, or Paulus; the Remittents and other Febrile diseases, observed by them in the island of Thasus, in Greece, and Asia Minor, having little affinity with either the Synochus, or Contagious malignant Fever, occurring in this country.

Days of the Fever.	No. of Crises.
4th	Six.
5th or 6th	Three.
7th	Ten; one case fatal.
8th and 9th	Five; two cases fatal.
10th and 11th	Ten; two cases fatal on the 10th night; three on the 11th day.
12th	Twelve; one case fatal.
13th	Five; one case fatal.
14th	Thirty; one case fatal.
15th	Two.
16th	None.
17th	Fourteen.
18th	One; fatal.
19th	One; fatal.
20th	None.
21st	Twelve.
22d	Three.
28th	Two.
29th	Three.
30th to 40th	Two.

The cases, which extended beyond the 22d day, were either instances of the Synochus, terminating in malignant Fever, (page 163,) or of the latter, when its stages recurred a second time in the manner stated page 267. In those cases which terminated on or before the seventh day, the crisis was promoted by the early use of emetics.

The Peruvian bark was of no considerable advantage in the Fever above described, unless emetics had been administered before the end of the fourth day. Several of the patients were washed twice a-day with cold water and vinegar, with only temporary relief. In the most unfavourable state of the disease, blisters were of great utility; they produced a remission of the fever, made the pulse more free and regular, and seemed to be the means of procuring rest. Some patients were relieved by them, in whom the loss of sight, of speech, and of the power of deglutition, seemed to threaten immediate dissolution. If two or three persons lie in one bed, (which often happens in the crowded dwellings of the poor,) one or more of them usually fall victims to the Fever; I am, however, happy to mention one or two instances of a recovery, during the present month, even in such unfavourable situations.

The state of the atmosphere* must have undoubtedly caused the great extension and aggravated symptoms of the malignant Fever. On this subject it is proper to remark, that, between the 22d of June and the 17th of November, in a period of one hundred and forty-seven days, there were only eight days free from rain; a circumstance, perhaps, unparalleled in meteorological observations.

* Dr. Short, in his 'Meteorological Observations,' (vide Comparative History of the Increase and Decrease of Mankind, p. 150,) remarks, that "a long sultry southerly constitution brings putrid malignant, or slow nervous fevers." It has, however, been shewn, by more recent experience, that it is not possible to calculate with any degree of precision the influence of the temperature or other known qualities of the atmosphere in the production and propagation of Malignant Fevers: thus the mortality from this source in London in the winter of 1794-5, so memorable for its severity, was nearly twice as great as in the mild and open winter which succeeded it: whereas during the winter of 1813-14, the most inclement we have experienced since that of 1794-5, the metropolis remained almost entirely free from contagious fever, which became again epidemical in the autumn of 1817, and following winter, which was remarkable for its extreme mildness. See Dr. W. Heberden's Paper on the Influence of Cold upon Health, Phil. Trans. Vol. lxxxvi. page 283: Dr. Bateman's Treatise on Fever, page 16; and his Reports on Diseases, pp. 237, 258.—A. S.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of November to the 20th of December.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Measles	21	Shingles	1
Scarlatina anginosa	8	Slow Fever	3
Hooping-cough	5	Child-bed and Milk Fevers	3
Small-pox	4	Abortus and Menorrhagia	4
Contagious, malignant Fever	9	Febrile Diseases of Infants	8
Catarrh	20	Hectica	5
Acute Rheumatism	6	Hemicrania	1
Inflammatory Sore-throat,	2		
Pneumonia	3		
Peritoneal Inflammation.	2		
Phlegmone testis	1		

CHRONIC DISEASES.

Cough and Dyspnœa	37	Hysteria	1
Hæmoptoë and Phthisis,	10	Lethargy	
Chronic Rheumatism	16	Dyspepsia	15
Lumbago and Sciatica	5	Gastrodynia	8
Asthenia	16	Enterodynia	6
Dropsy	6	Jaundice	1
Cephalæa and Vertigo	10	Diarrhœa	8
Paralysis	2	Colica Pictonum	2
Epilepsy	3	Hæmorrhoids	2

Worms	3	Itch and Prurigo	6
Amenorrhœa	4	Lepra	4
Fluor albus	1	Ichthyosis	1
Hæmaturia	2	Urticaria	1
Gravel and Dysury	3	Pompholyx	1
Struma	3	Impetigo	5
Cancer	1	Porrigo	3
Dentition and Tooth-rash,	4	Acne	2
Strophulus	2	Elephantiasis	1

No unfavourable case of Measles has yet occurred. The Scarlatina, however, has been attended with violent symptoms, and proved in two instances fatal. It is worthy of remark, that, when the Scarlatina, or Contagious, malignant Fevers, are fully formed, and a frost takes place suddenly, both diseases are thereby much aggravated, and often terminate fatally; but, at the same time, that the farther diffusion of these and other epidemical contagious disorders is usually prevented by a very cold atmosphere.

Since the commencement of the present frost, few malignant Fevers have appeared; but this advantage may not be, perhaps, a subject of congratulation, as the pulmonic diseases, which arise during a severe winter, are usually much more extensive and more destructive than Fevers.

Many cases have been noted every month

under the articles of Cephalæa and Vertigo. Head-ache takes place, unconnected with any particular febrile disease, from sorrow, fatigue, watching, and from sudden changes of temperature in summer as well as in winter. It is attended with a whiteness of the tongue, and a sensation of weakness or languor. A sharp and quick pulse, in this complaint, produces a throbbing at the temples, and an acute pain through the whole head. When the pulse is slow and feeble, the pain is described as dull and heavy, sometimes girding round the head, sometimes fixed at the nape of the neck*. In persons who have constitutionally a very languid circulation of the blood, the latter species of Head-ache recurs on every slight occasion, and often becomes periodical, returning every day, or every other day, at a stated hour, independently of any manifest exciting cause. Under this form it has received another name, Hemicrania, (or, according to some writers, Hemicranium,) which is particularly obstinate and distressing†. The Hemicrania is only

* With how much greater severity this disorder takes place in a warm climate may be seen in the account of it by Celsus, lib. iv. cap. 2.

† Alterutram partem, dextram vel sinistram duntaxat, exquisitè, ac si caput per medium divisum esset, si infestet

felt on one side of the head: it affects some females at the period of the cessation of the catamenia; is often the consequence of external injuries to the head, and often of slight effusions on the brain of water, blood, &c. from internal causes: in some persons it is connected with diseases of the eye, in others with an irregular action, or some organic affection of the heart.

Dr. Fothergill makes the following remarks on Head-ache, March, 1753: "About the middle of the month, divers complained of unusual Head-aches, attended with feverish symptoms, which were often very alarming at the first attack, but soon subsided. They

dolor, Hemicrania vocatur; quæ a temporum pulsatione fere incipit, et ad suturam sagittalem, caput per medium longitudinis dividentem, protenditur, et per circuitus tertianos vel quartanos, quod tertio, vel quarto die redire soleant dictos, fere ægrum exercet: est et alia species, quæ stata hora, singulis diebus, cum dolore lancinante, in angustâ aliquâ sede calvariæ, sæpe per aliquot septimanas, ægrum misere torquere solet: quâ et ego jam bis circa supercilium oculi dextri obrutus, et per aliquot septimanas excruciatus sui. Plateri De Cap. dolore 3. Compare Alex. Trallian. lib. i. cap. 12. Paul. Æginet. De Re Medica, lib. iii. cap. 5. Actuar. Meth. Med. lib. vi. cap. 2. Gorræi Defin. Med. and Chesneau, Obs. Med. 1. Foresti Obs. lib. ix. Hoffman, tom. i. and ii. Consult. et Respons. med. &c.

complained first of pain or stiffness in the neck, with darting pains about the temples, and so acute as oftentimes to raise the pulse and heat considerably. The external parts of the head grew sore, and, to such a degree, as it was painful to rest it on the pillow. Now and then the pains remitted an hour or two, and again returned with their former violence; but the whole abated in three or four days, and gradually wore off, leaving, however, a sort of uneasiness about the head, which the patients commonly compared to a cap of lead, or some heavy substance, inclosing it. Moderate bleeding or cupping, blisters, nitre, joined with volatiles, in small doses, and given often, were ordered to several under these complaints with advantage."

Vertigo, with or without head-ache, occurs more especially during the summer months: it forms a part of the asthenic state, described page 171, but is often a transitory effect of exposure to hot sunshine, or of a strong heat reflected from brick walls, glass windows, &c. It likewise affects persons closely confined to occupations requiring a fixed and minute attention, as engravers, painters, engrossers, compositors, watch-makers, milliners, lace-spanglers, &c. many of whom add

to the complaint by burning charcoal in their work-rooms. The Vertigo arises from many other causes, and under a variety of circumstances*: but, in the present work, I have chiefly to note its proportion to other diseases, considering it as the effect of climate or season. In this point of view Dr. Fothergill's observations upon it, Aug. 1758, seem very applicable: "Many, during this month, have complained of disorders in the head, before the rains, about the middle of the month especially. Some had a dizziness to such a degree as to render it almost dangerous to walk abroad: others had acute pains affecting one part of the head only, as the forehead, or down one side, with great languors, sickness, and a quick, small pulse: in several of these, after a few days, the disorder became intermittent, and was easily removed by the bark. Indeed, most of the acute diseases, that have occurred in this period, have discovered a tendency this way; the head being very much afflicted during the paroxysm, not so much with violent pain as with great confusion and dizziness, so far as to be unable to raise it from the pillow with-

* Hoffman, tom. iii. cap. 3.

out suffering greatly. Bleeding moderately, at first, with an emetic as soon as convenient, the saline draughts during the paroxysm, and the bark in substance given plentifully in the intervals, soon removed the complaints in many instances. Blisters gave no relief, but most commonly brought on very violent stranguries, which seems to be their usual effect in summer and in autumnal diseases more than in those of the spring."

The disorder often put down under the title of Palpitatio has been noticed and properly described by our countryman Dr. Willis*: "Palpitatio est cordis motus sive pulsus inordinatus, qui adeò vehemens, et immanis interdum existit, ut non solùm tactu manifestiùs percipi, verum et oculis conspici, immo interdum ad distans quoddam audiri possit. Porrò ab autoribus fide dignis narratur, a vehementiore cordis vibratione, et costarum percussione eas interdum effringi; aut in junioribus foras propelli, protuberantesque manere." This disease originates from some local impediments to the circulation, as stated by Willis, Hoffman, and others. In four cases,

* De Medic. Operat. sec. vi. cap. 3. Compare Hoffman, tom. iii. sec. 2. cap. 1.

examined after death under my own inspection, it had been occasioned by an enlargement of the heart, with a thickening of its substance, and an adhesion to the pericardium. The constant and violent beating of the heart produces a variety of anxious and painful sensations, cough, dyspnœa, with restlessness or loss of sleep, a querulous, impatient temper, and irregular conduct. The complaint in some terminates by sudden death; in others it arrives at the same end by the slow progress of Hectic, Dropsy, Purpura, and gangrenous ulcers of the extremities. Under the present article I will just mention the disease termed Angina pectoris, which, in all the instances I have had an opportunity of examining, proceeded from some organic affection: it may, however, be supposed to arise occasionally from a deficient irritability of the heart, in consequence of which this prime mover through the body, oppressed by too much exercise, or by the influence of unruly passions, is disposed to stop, or at least to faulter greatly in its action. Both the Angina pectoris, and that species of Palpitation which originates from an enlargement of the heart, may often depend on original structure, or a predisposition hereditarily

communicated, since both of them are found to affect many individuals of the same family, a circumstance I have frequently had occasion to remark.

Epilepsy has nearly the same predisposition, but is often immediately excited by some local pressure on the brain from tumors, exostoses, &c. also from some irregularity in the arrangement of the bones of the cranium, and even from a mal-conformation of the chest.

The Chorea, or St. Vitus's Dance, takes place in very delicate and irritable constitutions, and is usually attended with a quick, feeble, and irregular pulse. In two cases examined after death, from two to four ounces of clear lymph were found in the ventricles of the brain, and about the same quantity within the pericardium. It will therefore appear that the antient practice in this disease, by repeated bleeding and purgatives, must be generally injurious. A case inserted by myself in the London Medical Journal, vol. vii. may seem to contradict the above assertion; but it is just and proper now to say that I met with the fate of other hasty case-writers. Before the volume recording it was circulated, my patient had a severe relapse,

and was at length cured by a very different plan.

In the case of Lethargy the same symptoms appeared as in the first species of this complaint, described by Dr. Willis*. The patient was a female nearly sixty years of age; she gradually lost her activity, and all relish both for food and society; became dull and heavy; and, at length, fell into a state of permanent sleep, from which she could not be awaked without great difficulty, and then her attention could scarcely be commanded for a moment: the little nourishment applied was also taken without sensibility: her pulse was from 50 to 58; her tongue was dry, brown, and as it were wrinkled, but without any fur upon it. It was at last impossible to rouse her by any stimuli, and, a few days after, the actions of life ceased. She remained in the state of torpor, on the whole,

* De Animâ Brutorum, cap. iii. De Lethargo. Qui morbo isto laborare dicuntur, aut magno ejus insultu planè decumbentes, in tantum sopore obruuntur, ut vix ab ullâ sensibilis objecti impressione excitari queant: quin a punctione aut vellicatione acriori, si forsan oculos aperiunt, aut membra surrigunt, denuò statim insensiles facti reclinant, et non rarò, cum sibimetipsis relinquuntur, somno perpetuo indulgentes, transitione facillima, mortem ipsam, quam in typo simulant, reverà obeunt.

twenty-six days. The slow and languid circulation of the blood, peculiar to this disease*, occasions a gradual effusion of water upon the surface of the brain, and into its ventricles. Death is the effect of pressure from the accumulated fluid.

The Lethargy is not a frequent disease among our own countrymen. I have seen it mostly in Jews, and other aliens of a dark, swarthy complexion, who sometimes lie six or eight weeks in the torpid, insensible state above described.

General Bill of Mortality for the Year 1799.

Abortive and Still-born,	580	Colic, Gripes, and Twisting of the Guts	8
Abscess	27	Consumption	4843
Aged	1343	Convulsions	3794
Ague	3	Cough and Hooping-cough	451
Apoplexy, and suddenly,	249	Cramp	1
Asthma and Phthisic	663	Croup	16
Bedridden	2	Diabetes	1
Bleeding	16	Dropsy	906
Bursten and Rupture	20	Ear-ache	1
Cancer	48	Eaten by Lice	1
Child-bed	131		
Colds	14		

* Εἰ δὲ πάνυ ἀσθενῶς ἔχοιλες, καὶ πάνυ κραλάμενοι, ὐδὲ ὅλως ὑπακούουσιν, ὐδὲ κινῦσι τὰ βλέφαρα, καὶ τὺς σφυγμὺς ἀραιὺς, καὶ μικρούς, καὶ ἀμυδρούς ἴσχυσιν. Alexander Trallian. lib. i. cap. 14.

Evil	5	Sore-throat	12
Fevers of all kinds	1784	Sores and Ulcers	11
Fistula	3	Spasm	2
Flux	5	Stoppage in the stomach,	11
French Pox	23	St. Vitus's Dance	1
Gout	91	Swine-pox	2
Gravel, Stone, and Strangury	11	Teeth	335
Grief	4	Thrush	35
Headmouldshot, Horse-shoe-head, and Water in the head	76	Worms	11
Jaundice	78	Bit by a Mad Dog	2
Jaw locked	1	Broken Limbs	4
Imposthume	1	Bruised	4
Inflammation	433	Burnt	13
Itch	2	Drowned	99
Leprosy	1	Excessive Drinking	5
Livergrown	10	Executed	12
Lunatic	107	Found Dead	10
Measles	223	Fractured	2
Miscarriage	3	Frightened	2
Mortification	226	Frozen	2
Palpitation of the heart,	2	Killed by Falls and several other Accidents,	64
Palsy	105	Killed themselves	28
Pleurisy	14	Murdered	3
Quinsy	1	Poisoned	6
Rash	1	Scalded	2
Rheumatism	3	Shot	1
Scurvy	3	Smothered	1
Small-pox	1111	Starved	4
		Suffocated	7

Christened	Males	10087	18,970.
	Females	8883	
Buried	Males	9046	18,134.
	Females	9088	

Whereof have died under two years of age 5211; between two and five, 1790; five and ten, 644; ten and twenty, 573; twenty and thirty, 1299; thirty and forty, 1724; forty and fifty, 1924; fifty and sixty, 1758; sixty and seventy, 1565; seventy and eighty, 1125; eighty and ninety, 456; ninety and a hundred, 63; and a hundred and one, 2.

ACCOUNT OF DISEASES IN LONDON,

From the 20th of December 1799 to the 15th of March 1800.

List of the Cases which occurred in my own Practice.

ACUTE DISEASES.

Epidemic Catarrh	106	Inflammation of the eyes,	4
Contagious, malignant Fever	68	Inflammatory Sore-throat,	6
Scarlatina anginosa	15	Inflammation of the bowels	3
Measles	9	Gout	4
Hooping-cough	5	Hæmoptoë	5
Small-pox	4	Epistaxis	2
Acute Rheumatism	20	Intestinal Hæmorrhagy,	6
Rheumatic pain of the face	8	Renal Hæmorrhagy	2
Inflammation of the lungs,	11	Menorrhagia	8
Pleurisy	2	Abortion	2
		Child-bed Fever	7

Acute Diseases of Infants	27	Quartan	1
Slow Fever	4	Tertian	1
Aphthous Fever	6	Hectica	10

CHRONIC DISEASES.

Cough and Dyspnœa	151	Prolapsus	2
Pulmonary Consumption	46	Gravel and Dysury	8
Chronic Rheumatism	20	Incontinence of urine	6
Lumbago	4	Hæmorrhoids	3
Sciatica	3	Jaundice	14
Dropsy	15	Worms	2
Asthenia	38	Tabes mesenterica	7
Palsy	6	Struma	8
Spasms of the lower extremities	1	Bronchocele	1
Spasms of the fore-arm,	1	Tooth-rash	3
Vertigo and Head-ache,	11	Lichen	5
Epilepsy	2	Prurigo	6
Hydrocephalus	4	Lepra	2
Hysteria	8	Scaly Tetter	4
Melancholia	2	Pityriaris	3
Palpitatio	3	Erythema	3
Dyspepsia	35	Purpura	1
Gastrodynia	19	Thrush	4
Enterodynia	19	Herpes	2
Bilious vomiting	7	Shingles	1
Diarrhœa	26	Ecthyma	2
Obstipatio and Colic	6	Itch	5
Chlorosis	22	Impetigo	4
Fluor albus	5	Porrigo	7
Scirrhus uteri	2	Lupus	3
Scirrhus of the liver	2	Gutta Rosea	3
		Furunculi	2

Pulmonic diseases were almost universal, and particularly severe in the months of January and February. During the latter month there occurred an epidemic Catarrh, chiefly affecting children, and attended with nearly the same symptoms as the Catarrh in February 1797 (see page 189). This disease, although violent for some days, did not, in any instance, prove fatal*. Since the beginning of March, inflammatory and hæmorrhagic complaints have been very prevalent. In the cases of Pleurisy and Peripneumony, venæsection was employed more than once, before the acute pain and sense of constriction about the chest could be relieved.

The short frost in December, though it gave a check, was not sufficient wholly to arrest the progress of the Scarlatina anginosa, and malignant Fever, the extent and fatality of which were formerly noticed. During the

* This complaint was, by many practitioners, improperly termed an Influenza. The latter diseace is infectious, and, when it does occur, is general. Its progress and symptoms in 1782 and 1788, the years of its last visitations here, are accurately recorded in the first volume of "Medical Communications," and in the "London Medical Journal for 1788." Dr. Sydenham has given a minute account of a similar epidemic, at the close of the last century, in his Schedula monitoria de novæ Febris ingressu.

mild, open weather in January, and at the beginning of February, the Fever was again rapidly diffused to a very great extent, and with an aggravated train of symptoms. Among the poor, the mortality from this cause was very considerable, notwithstanding the attentive administration of proper articles of diet, and of suitable remedies, with plenty of wine. The good effects of all these applications are often superseded by the miserable accommodations of the poor, with respect to bedding, and by a total neglect of ventilation in their narrow, crowded dwellings. It will scarcely appear credible, though it is precisely true, that persons of the lowest class do not put clean sheets on their beds three times a year; that, even where no sheets are used, they never wash or scour their blankets and coverlets, nor renew them till they are no longer tenable; that curtains, if unfortunately there should be any, are never cleaned, but suffered to continue in the same state till they drop to pieces: lastly, that from three to eight individuals, of different ages, often sleep in the same bed; there being, in general, but one room, and one bed, for each family. To the above circumstances may be added, that the room occupied is either a deep cellar, almost

inaccesible to the light, and admitting of no change of air; or a garret, with a low roof and small windows, the passage to which is close, kept dark in order to lessen the window-tax, and filled not only with bad air, but with putrid, excremental, or other abominable effluvia from a vault at the bottom of the stair-case. Washing of linen, or some other disagreeable business, is carried on, while infants are left dozing, and children more advanced kept at play whole days on the tainted bed: some unsavoury victuals are from time to time cooked: in many instances idleness, in others, the cumbrous furniture, or utensils of trade with which the apartments are clogged, prevent the salutary operation of the broom and white-washing brush, and favour the accumulation of a heterogeneous, fermenting filth*. From all these causes combined

* The rooms do not change their condition till they change their tenants: often, indeed, so little care is taken, that enough of the contagion remains to infect all the inmates who successively occupy the same premises. I recollect a house in Wood's Close, Clerkenwell, wherein the fomites of Fever were thus preserved for a series of years: at length, an accidental fire cleared away the nuisance. A house, notorious for dirt and infection, near Clare-market, afforded a farther proof of negligence; it was obstinately tenanted till the wall and floors, giving way in the night, crushed to death the miserable inhabitants.

there is necessarily produced a complication of fetor, to describe which would be as vain an attempt as for those to conceive who have been always accustomed to neat and comfortable dwellings.

The above account is not exaggerated: for the truth of it I appeal to the medical practitioners, whose situation or humanity has led them to be acquainted with the wretched inhabitants of some streets in St. Giles's parish, of the courts and alleys adjoining to Liquorpond-street, Hog-island, Turnmill-street, Saffron-hill, Old-street, White-Cross-street, Grub-street, Golden-lane, the two Bricklanes, Rosemary-lane, Petticoat-lane, Lower East Smithfield, some parts of Upper Westminster, and several streets of Southwark, Rotherhithe, &c.

It cannot be wondered at, that, in such situations, Contagious Diseases should be formed, and attain their highest degree of virulence. The inhabitants of the second story, in houses occupied by the poor, are usually better accommodated; and therefore experience, during sickness of any kind, the best effect from public and private charities. But persons thus stationed suffer from contiguity, and from their friendly attentions to those above them, or to the tenants of the

cellars; so that, in whatever part of the house a Fever commences, it is soon diffused among all the inmates and their occasional visitors, especially in seasons which favour its progress, like the last autumn and winter. Children, and women constantly residing in infected apartments, seem to get habituated to the action of the fomites. Men and boys, by means of fresh air, and the exercise of the day, shake off the effects of the virus, and escape long unhurt. It must, however, be observed, that if, through taking cold, or any other cause, they should be confined to the house for some days, they assuredly take the Fever. So it happened in the late unfavourable season: whoever was obliged to keep his bed for a Catarrh, Pleurisy, or Inflammation of the lungs, within three or four days caught the Fever; and almost every one so affected died. The children are infected from the new source of contagion; and the mother, after closing the eyes of her husband, and, perhaps, of more than one of her offspring, sinks exhausted with grief, watching, and fatigue, being herself the last victim to the disease. It is a melancholy consideration that, in London and its vicinity, hundreds, perhaps

thousands, of labourers, heads of families, and in the prime of life, are thus consigned to perish annually, being often so situated that medical applications, or cordial diet, cannot in any wise alleviate their distress. Persons in the higher ranks of life are much endangered by the thoughtlessness of servants, who privately visit their sick friends in infected rooms, and also carry thither the children entrusted to their care. Another circumstance, by no means consolatory, is, that linen, and other apparel, sent to laundresses in close parts of the town, must sometimes return to families thoroughly impregnated with the effluvia of putrid Fever, Scarlatina, Small-pox, Hooping-cough, or Dysentery.

But where is a remedy to be found for so many evils?—Hospitals are either barred against the entrance of contagious diseases, or, if leave of entrance be obtained, it generally comes when the patient is incapable of being removed, there being but one day throughout the week in which he can be admitted, unless by some very particular interest. Pecuniary aid, whether transmitted by the warm heart of benevolence, or wrenched

from the slow, reluctant hand of parochial administrators*, is an insufficient palliative for the present case. Shall the unhappy patient then seek for refuge in the parish workhouse? Alas! the Fever is already making its ravages there†.—What therefore is to be done? All these mischiefs admit of ready alleviation, and might, with proper management, be removed at a moderate expense. Let Houses of Recovery be established in open, airy situations, at some distance from other buildings, but adjoining to different districts of the metropolis; to be supported either at the joint expense of the several parishes within each district, or by a voluntary subscription among its principal inhabitants. As soon as any person exhibits symptoms of a Fever from infection, let him be instantly removed into the House of Recovery, where, being washed, and put, with clean linen, into a fresh bed, he will soon be freed from his com-

* I do not intend this as a general censure on parish-officers: many do their duty conscientiously; but I have been mortified and indignant at the coldness with which some of them receive information of the most complicated misery, and at their positive refusal to inspect the distress, however strongly represented.

† This has taken place in very many of the workhouses during the winter; several of the attending surgeons died, and others have suffered severely from the Fever.

plaints, and able to rejoin his wife and family. To them, in the mean time, a loan of bedding should be made till their own bed is cleansed, and till the walls and floor are washed or scoured. The revenue necessary to support houses instituted on such a plan is not so great as might be imagined. Both the utility and expense of them have been already put to a noble trial by the merchants and manufacturers of the populous town of Manchester. Their example deserves to be followed in this metropolis, and all other great cities; the necessity of a receptacle for contagious Fevers being always proportioned to the magnitude of the place. The same receptacles might occasionally serve for the relief of asthmatic, consumptive, and other pulmonic diseases, which predominate, or are aggravated, at a season when Fevers are nearly extinct. One-fourth, and, in very unfavourable seasons, one-third of all the deaths in London, is, according to the Bills of Mortality*, caused by

* There died in London, of Pulmonic diseases,

In 1796,	5910	out of	18,238.
In 1797,	5439	out of	16,714.
In 1799,	6210	out of	17,285.

The articles of still-born and abortive, of violent deaths and casualties, are necessarily excluded from the list. (See page 198-200.)

diseases of the lungs; a circumstance which surely merits some consideration. These complaints are universally, and perhaps with reason, excluded from hospitals: they require a free circulation of pure air, and admit of little relief where patients are confined to small rooms in close, narrow courts and alleys. Pulmonic diseases, however, although so fatal in themselves, extend no farther than the individuals affected with them; whereas the Scarlet Fever, malignant Fever, and malignant Sore-throat, through the medium of infectious fomites, endanger the health and peace of the whole community. Such diseases, therefore, should be the more immediate object of attention: and I have thought it my duty, after observing so great a mortality to sound an alarm to our fellow-citizens; to state the origin, causes, and rapid diffusion, at some seasons, of putrid, infectious diseases; and to point out the means of preventing the calamities and devastation annually caused in an useful class of people, and extended from them to the superior ranks.

Having given my sentiments, and the result of my own knowledge, on the subject, I cannot but do justice to those who first carried into execution the plan above recommended,

and to others, who, probably before me, have thought it applicable to the state of the poor in London. It is, therefore, with satisfaction, I refer to Dr. Ferriar's Medical Essays; and to a transcript from them, with other original observations, published in the reports of the Society for bettering the condition of the poor, by the unwearied philanthropist, Thomas Bernard, Esq. treasurer to the Foundling-Hospital. As the example of the inhabitants of Manchester has been already followed in other places; we hope a similar plan will soon be adopted in every considerable town through the British empire*.

* Mr. Bernard† has been assisted, in his endeavours to promote the Institution here recommended, by William Waddington, Esq. Treasurer of the Public Dispensary, and by several other gentlemen of the highest respectability. It affords me pleasure to add, that a more minute statement of the situation of the poor than I have given, with a plan for Houses of Recovery, in the vicinity of London‡, has been drawn up by my friend and colleague Dr. T. A. Murray, and is now publishing under the sanction of the patriotic society above-mentioned.

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† The late Sir Thomas Bernard, Bart.

‡ The London House of Recovery, so strongly recommended by Dr. Willan, was established in 1802. The advantages derived from this invaluable Institution by the public are too well known to require any particular mention in this place.—A. S.

ACCOUNT OF DISEASES IN LONDON,

From the 15th of March to the end of June.

List of the Febrile Diseases which occurred in my own Practice.

Contagious, malignant Fever 83	Gout 5
Hooping-cough 7	Apoplexy 3
Dysentery 5	Hydrocephalus 8
Scarlatina 13	Mania 2
Measles 11	Hæmoptoë 8
Small-pox 8	Hæmatemesis 2
Chicken-pox 1	Intestinal Hæmorrhagy, 3
Acute Rheumatism 16	Abortus and Menorrhagia 12
Catarrh 44	Ephemera 4
Cephalalgia* 6	Summer Fever 6
Ophthalmia 6	Diarrhœa 12
Otalgia 2	Cholera 1
Inflammatory Sore-throat, 7	Slow Fever 9
Erythematic Sore-throat, 5	Child-bed and Milk Fevers 9
Aphthous Sore-throat ... 3	Acute Diseases of Infants, 41
Pleurisy 1	
Peripneumony 10	
Enteritis 3	Quotidian 1
Nephritis 1	Tertian 1
Cystitis 1	Hectic 10
Erysipelas 1	Hemicrania 2
Roseola 2	Pleurodyne intermittens, 1
Urticaria febrilis 1	

* Sauvages, Nosol. Med. cl. vii. ord. ii. gen. xi. sp. 1, 3, 5, 10, 11.

From the 15th of March, to the end of the month, the wind was mostly south-east and south-south-east; in April, west and north-west, but, after sun-set, frequently north-east. In May and June the wind was remarkably variable. Through the whole season there was frequent, but small rain, with a very irregular temperature, the range of the thermometer being, in March and April, from 32° to 62°; in May and June, from 43° to 75°.

The malignant Fever greatly predominated over the usual series of vernal diseases. With these it was occasionally complicated, and, in most cases, produced a remarkable degree of coma and stupor; yet its fatality was not so considerable as in the autumnal months, bordering on winter. (See page 325.)

The Hooping-cough was particularly severe; the Measles, and Scarlatina, moderate in their symptoms; only two cases of the latter terminated fatally. Cases of Hæmoptoë, Pneumonic Inflammation, Enteritis, with some other inflammatory complaints, were very violent; and about one-third of them fatal.

Diarrhœa often takes place when perspiration is suddenly checked by the interchanges

of heat and cold in spring, or autumn. It is attended with slight shiverings during the day, with a burning heat of the skin at night, with pain of the back, thirst, a quick pulse, whiteness of the tongue, and loss of appetite. These symptoms continue from four to eight days: many persons are affected with them under circumstances wherein others, of a different constitution, would have a Coryza, or Catarrh. The alvine discharges are numerous, large, and watery, but without much pain. In autumn, this complaint frequently assumes the form of the Dysentery; in the spring but seldom. I must, however, observe, that, in March, April, and part of May last, the disease was protracted beyond the usual limits, and terminated with severe gripings and tenesmus, with discharges of blood, mucus, and sanies. One case of Cholera occurred the last week in May, with a profuse discharge of green bile from the stomach and bowels, and with violent cramps of the lower extremities, but was relieved in two or three days.

Cases of acute Hydrocephalus, as it has been described by Dr. Quin * of Dublin,

* Treatise on the Dropsy of the Brain, page 34.

occur, from time to time, in this place: but I never met with so many cases nearly together as during the present spring. All the patients were children from two to twelve years of age. They were at first affected with the usual symptoms of fever, complained of violent head-ache, and of pains in the limbs, had frequent returns of nausea, and discharged much bile from the stomach, while the bowels seemed inactive, and sometimes insensible to the action of the strongest purgatives. In five or six days most of the febrile symptoms disappeared; the tongue was moist, the pulse became slow and languid; the vomiting ceased: there was, however, a constant delirium, when the patients were roused out of the oppressive stupor to which they had always a disposition. Being awakened, they appeared unconscious of surrounding persons or objects: their pupils were greatly dilated, and the axes of their eyes turned in different directions: they swallowed drink unwillingly, or with difficulty, and were only anxious to return to darkness and repose. Their dislike to the light, or any disturbance, was marked by immediate complaints, or fretfulness; often by loud and dissonant screams. As the disease advanced,

the pulse became again quick and unequal: in one case there was a paralysis of the right side; in two others, the irregular motions of the limbs, termed St. Vitus's Dance, took place at the second alteration of the pulse, and continued till within a day or two of the patients' death. Three patients out of the eight recovered, two about the eighteenth day of the disorder, the third, an infant, at the end of the fifth week, after having been long abandoned to its fate: the brother of this infant, six years old, died on the thirtieth day. Perpetual blisters on the head, leeches, in some cases mercurial frictions, in others calomel frequently repeated, seemed to be the most efficacious remedies. The remaining four, whose disorder was fatal, died between the twelfth and twenty-sixth day of it. The body of one of them, a girl, ten years of age, was examined after death. Her brain was firm, and of a proper colour, but the veins on its surface were much distended. Two ounces of lymph, or somewhat more, had been effused into the ventricles: the same quantity was found in the pericardium; and not less than two pints of clear fluid were lodged in the cavity of the chest. There was no morbid appearance, which deserves to be

mentioned, in the state or contents of the bowels. (See the report on Chorea, &c. for November 1799.)

The complaint above-described should be distinguished from the symptomatic Hydrocephalus, which often takes place, with very similar symptoms, after the crisis of malignant Fevers; during the Hectica infantilis (see page 144); and in some other acute diseases of children, particularly the febrile state produced by dentition, worms, and disorders of the bowels, or mesentery. Cases of this kind are usually removed, within a week or two, by the use of calomel or other active purgatives, and blisters; and sometimes by the remedies mentioned page 320.

Dr. Quin has properly given a distinct consideration to the slow or chronic* species of Hydrocephalus, which is attended with a gradual enlargement of the head during infancy, and continues for a series of years.

Cases of Apoplexy must always be numerous in large cities, where the predisposition to them is seconded by the exciting causes most likely to give it effect, viz. intemperance, fatigue of body, too strong

* Page 14 to 18.

exertions of mind, and every passion that agitates the human frame. The sanguineous Apoplexy is, however, sometimes a disease connected with season; as such, it usually takes place about the beginning of summer, and may be soon relieved by bleeding, cupping, blisters, and evacuants, along with a proper diet. A similar mode of treatment would apply to the disease when produced by excess in eating, and by violent fits of passion; but cases of this kind often prove fatal before any relief can be administered. Another species of Apoplexy, which affects persons of a weakly constitution, who are pale, thin, and emaciated, who have been depressed by sorrow or misfortune, though it seldom occasion instantaneous death, may yet render the remainder of life burthensome, by disabling the limbs, and enfeebling the memory. Under such circumstances, whether we suppose congestion of blood and effusion of lymph to take place from a languid, irregular circulation, or the communication between the blood-vessels and nerves to cease partially from a still higher degree of debility, it will be manifest that the remedies above-mentioned, at least that large or repeated bleeding, with the use of emetics,

purgatives, &c. must be injurious, if not sometimes fatal*. I have seen young persons, from twelve to eighteen years of age, affected with Apoplexy and Hemiplegia: such instances are rare, yet they have induced many observers to maintain that Apoplectic and Paralytic complaints are beginning of late to encroach on every period of human life, and that they are much more numerous than in former times. On comparing Dr. Fothergill's observations made half a century ago†, with the result of my own experience, I do not find that there is any sufficient ground for this opinion: however, the Bills of Mortality, if we go back a hundred years, declare in its favour, as will appear by the following table:

* Dr. Fothergill's remarks on this subject merit attention; but, while enforcing a mode of treatment, at the time peculiar to himself, he seems to leave us in doubt whether he would have prescribed blood-letting in any apoplectic case whatever. See "Observations on Weather and Diseases," February, March, May, July, 1753; March, July, 1754. Also "Medical Observations and Inquiries," vol. vi.

† See below the Bills of Mortality for the middle of the century.

Years.	Died of Apoplexy, and suddenly.	Died of Palsy.	Total Mortality.
1696	109	17	18,638
1697	117	27	20,970
1698	116	21	20,183
1699	106	24	20,795
1796	225	73	19,288
1797	214	99	17,014
1798	224	86	18,155
1799	249	105	18,134

The article of Palsy may have been enlarged for some years past by an increase of the business of house-painters, plumbers, and makers of white lead. This poison affects the constitution in nearly the same order as ardent spirits (see page 241), first with violent pains of the stomach or bowels, and with obstinate costiveness, termed Colica Pictonum*. After repeated fits of the latter, some are affected with swellings about the feet and ancles, as in rheumatic cases; others with burning heat, and tenderness of the soles of the feet, impeding motion, and preventing sleep. Sometimes the limbs are benumbed: the wrists, in particular, lose the power of action; the fingers become useless and con-

* See Dr. Huxham on the Devonshire Colic, page 5.

tracted. Those who are often affected with the swellings of the joints are less liable to the paralytic state of the limbs. In many, the sight is much impaired; and, when the poison has pervaded the whole constitution, the patient becomes torpid and insensible, as in the Lethargy; (see page 338) others die in a state of phrenzy, or violent delirium. In the white-lead manufactories, workmen are sometimes affected in a week or two, sometimes not for months, or even years. On the first sensation of pain in the stomach, and contraction of the intestines, the sufferers have recourse to spirits, which often have a worse effect than the original poison. The most prejudicial operation in making white lead is the sifting or separating the metallic part. This was formerly done without any precaution, and the room was necessarily clouded by the finer particles of the white lead. However, I am happy now to state, that workmen are likely to be no longer disabled in these manufactories, an improvement in the process securing them from the possibility of any material injury. Sifting the white lead from the metallic part is, at present, conducted under water, which prevents the particles of the former from being diffused

in the air. House-painters and plumbers have the symptoms in the order just now mentioned, and are affected at different periods after application to business; some in a few weeks, some not till the third or fourth year: a few, with strong constitutions, follow these occupations twenty or thirty years, yet neither lose the motion of their limbs, nor ever experience the Colica Pictonum. The limbs are seldom disabled without very many previous fits of the Colic, and not unless the business has been closely pursued from five to ten years or more. It is singular that the tongue is never injured, and that the right hand is not more affected than the left. Painters usually have weak and tender eyes, and are often affected with dimness or total loss of sight. I am informed that men constantly employed to incorporate the white lead with oil, lose, much sooner than house-painters, the use of their fingers and wrists, which can never be restored. The pains of the bowels, the swellings of the joints, and tenderness in the soles of the feet, are always greatly aggravated during the summer season. The proper treatment for the Colica Pictonum is nearly the same as that requisite for the Dysentery. (See the next Report.)

When the disease extends to the head and limbs, a warm bath is often found highly advantageous.

The Synochus, in June, was attended with the usual symptoms, and seldom of long duration. No regular account of this summer disease has been given by Morton or Sydenham. A Remittent Fever, mentioned in Dr. Fothergill's Observations on Weather and Diseases in August and September 1753, after a very hot summer, seems to coincide with the Synochus formerly described (see page 148): "Remittent Fevers, with violent head-ache, vomitings, restlessness, faintings, high-coloured urine, and bilious stools, became more frequent, but not very fatal; the patients bear moderate bleeding well, gentle purgatives of the saline kind, and plentiful diluents: blisters are seldom indicated: when applied, they are often injurious, and often bring on unconquerable stranguries, to which the sick are many of them prone, this present season, where no blisters have been applied. And the writer thinks he has, oftener than in one season, found that blisters, after hot, dry summers, are injurious in common, and, perhaps, for the very reasons that render them beneficial, nay, absolutely necessary, in most

kinds of vernal Fevers. In the present Remittent Fevers, the sick are disposed to copious sweats, which weaken, but afford no relief. Every plentiful evacuation sinks them considerably, and especially if the disease is advanced a few days, which is mentioned to guard against the imprudent, indiscriminate use of a celebrated powder, on account of its danger and uncertainty."

It is singular that this writer does not distinguish, by any specific name, the autumnal malignant Fever, nor has any where remarked that it spreads by contagion. He terms it in one place "Insidious, rheumatic Fever" (Nov. 1752); in another place, "Slow, continual Fever" (Jan. 1753); in other passages "Slow, remittent Fever" (June 1751); "Slow, remitting, dangerous Fever" (Oct. 1753); "Slow, treacherous, remittent Fever" (Dec. 1753); "Dangerous, remittent Fever" (August, September, October, November, 1754). He details, however, its characteristic symptoms with precision, and has noted the occasional appearance of aphthæ, miliary pustules, and petechiæ. After various considerations, he seems at length to decide against bleeding in this Fever, a point of practice at that time generally adopted.

Sydenham slightly mentions contagion as a mode in which Fevers may be propagated. He has formed species of them rather on fanciful grounds: for, though sometimes complicated with other diseases, their general appearances are uniform, and sufficiently characteristic*. A Fever, of six or eight weeks' duration, attended with heat, pain of the head, delirium, petechiæ, sweating, and a ptyalism perhaps the effect of aphthæ, he calls Febris variolosa (page 125). His Dysenteric Fever (page 152) was characterized by bilious diarrhœa, violent pain of the head, a thick, white fur upon the aphthæ, and occasional ptyalism. The same disease was, according to another account, attended with sore-throat and rheumatic pains. He also distinguishes a Febris comatosa (Processus, p. 16), and Febris morbillosa (page 217), supposing every continued Fever to take the leading features of its form from some other

* The characteristics of malignant Fever are given by Sydenham himself, with much accuracy, sec. i. cap. 3; and Processus integri, page 19, cap. 2, De Morbis Epidemicis.

The varieties of Fever, mentioned by him, are ramifications from the original stock marked by some particular symptom:—"Anni, 1667, 1668, Febrim variolosam, et Variolas produxerunt:—Anni, 1669, 70, 71, 72, Febrim dysentericam:—Anni, 1673, 74, 75, Febrim comatosam."

epidemic disease (page 216). In short, forgetting the effects of contagion, and in what situations malignant Fevers are at first produced, (see above, page 344-8), he refers their origin to some occult state of the air, wholly unconnected with its sensible qualities. "Variæ sunt annorum constitutiones, quæ neque calori, neque frigori, non sicco humidove ortum suum debent, sed ab occultâ potius et inexplicabili quadam alteratione in ipsis terræ visceribus pendent, undè aër ejusmodi effluviis contaminatur, quæ humana corpora huic aut illi morbo addicunt, determinantque." (Sec. i. cap. 2, page 5.)

ACCOUNT OF DISEASES IN LONDON,

From the 30th of June to the End of September.

List of the Febrile Diseases which occurred in my own Practice.

Contagious, malignant Fever	83	Acute Rheumatism	5
Small-pox	37	Gout	3
Scarlatina anginosa	10	Ophthalmia	5
Measles	7	Inflammatory Sore-throat	5
Chicken-pox	2	Erythematic and Aphthous Sore-throat	8
Hooping-cough	3	Croup	1
Pemphigus	1	Catarrh	7
Erysipelas	2	Pneumonic Inflammation	9

Inflammation of the bowels	4
Peritoneal Inflammation,	2
Hepatitis	3
Epistaxis	2
Apoplexy	2
Hæmoptoë	6
Hæmatemesis	4
Intestinal Hæmorrhagy,	3
Abortus, and Menorrhagia	8
Ephemera	5
Cephalalgia	12
Cholera	33
Synochus, or Summer Fever	32
Dysentery	18
Bilious vomiting, and Diarrhœa	42
Acute Diseases of Infants,	55
Child-bed and Milk Fevers	8
Hectic, and Slow Fever,	13
Quotidian	2
Tertian	3
Hemicrania	2

The present summer has been the hottest of any within my recollection. From the 22d of June to the 19th of August there were fifty-seven clear, sunshine days. The range of the Thermometer was, in July, from 54° to 81°; in August from 55° to 89°. Out of the shade, the heat could not be endured for any length of time: the nights also being close and sultry, the atmosphere always impregnated with dust, habitations in London became scarcely tenable. Mansions at some distance from it were not, however, exempt from inconveniences. The trees and shrubs were withered by the continued action of the sun's rays: gardens, plantations, &c. were whitened by dust from the high roads; and

the brown, scorched herbage rendered the appearance of the country desolate and joyless. Infinite swarms of insects infested both the sunshine and the shade: some species of them, not usually troublesome, enforced attention from their numbers. Whoever walked out at mid-day, in July, had every white article of dress nearly covered with small green Aphides, which could not be brushed off without much difficulty. In August, these insects were of a dark brown colour, and equally numerous: on the morning of the 20th, after a violent storm, I observed thousands of them lying dead in stables, and other out-houses, nor did any appear afterwards*.

* APHIS. Rostrum inflexum: antennæ thorace longiores: alæ quatuor erectæ: pedes ambulatorii: abdomen posticè sæpiùs bicorne. Linn. Syst. Nat. Insect. Hemiptera, gen. 227. Mr. White, in his Natural History of Selborne, mentions a sudden appearance of these insects, in immense swarms, observed on the 1st of August 1785: "At about three o'clock in the afternoon of that day, which was very hot, the people of the village were surprised by a shower of Aphides or Smother-flies, which fell in these parts. Those that were walking in the street, at that juncture, found themselves covered with these insects, which settled also on the hedges and gardens, blackening all the vegetables where they alighted. My annuals were discoloured with them, and the stalks of a bed of onions were quite coated over for six days after. These armies were then, no doubt, in a

Cases of the Synochus, or Summer Fever, were numerous in July and August: but the only appearances I observed, in addition to those already mentioned, (see page 149,) were a frequent eruption of miliary pustules, with or without a rash; hæmorrhagy from the nose; a fixed pain across the eyes; and the symptom termed coma vigil. The Measles, and Scarlatina, did not commence till September. Inflammatory, rheumatic, and catarrhal, affections likewise ceased during the hot weather, which was almost wholly occupied by malignant Fevers and the Small-pox. Fevers from contagion are not, in the greatest heat of summer, attended with the comatose state, (mentioned page 324,) but produce, at an early period of their course, a wakeful and active delirium, a quick and agitated pulse, with every symptom of violent irritation. The disease, under such a form, is, in common language, denominated Phrenzy Fever, a title which, I am sorry to observe,

state of emigration, and shifting their quarters; and might have come, as far as we know, from the great hop-plantations of Kent or Sussex, the wind being all that day in the easterly quarter. They were observed, at the same time, in great clouds, about Farnham, and all along the Vale from Farnham to Alton." Page 268.

medical practitioners occasionally adopt, and, having adopted it, apply for the case a mode of treatment applicable to another disease. On this subject, I beg leave to say, that it is injurious to draw much blood from the head by cupping-glasses; and that whoever is bled largely from the arm is precipitated to certain death. By a gentle emetic, or laxative at first, by the use of camphor, with small doses of tincture of opium, frequently repeated, by washing the head with vinegar, and the body, in some cases, with cold water, the patient becomes tractable, recovers his proper feelings, takes food, gets a little sleep at intervals, and passes through the latter stages of the disease often without any material embarrassment. Contagious, malignant Fevers are seldom numerous during the hottest part of summer: and, some years, they wholly disappear at that season. The reason of this may be, that rooms are then less crowded and better ventilated. That the heat or dryness of the air cannot alone produce such an effect*, the present summer

* Contagious Fevers do not often arise in very hot climates: hence some have thought that contagion is decomposed or destroyed by a great degree of heat. This notion is, however, proved to be erroneous by the rapid communi-

affords a sufficient proof. The number of infectious Fevers in it has exceeded that in most other summers, probably because the unfavourable season preceding (see pages 322 and 343-4) had caused so general a diffusion of them, that the fomites of contagion, which, through negligence or necessity, are always preserved in the dwellings of the poor, acquired a tenfold degree of virulence by the succession of persons affected, and continued their baneful operation even on subjects not otherwise predisposed to Fever.

The Small-pox often spreads extensively in a hot season, appearing in the confluent form, attended with petechiæ, livid vesicles, ulcerations of the tongue, palate, throat, &c. and succeeded by glandular swellings, ulcers often gangrenous, about the thighs, scrotum, and knees, puffy tumors of the soft parts, enlargement of the bones, stiffness of the

cation of the dreadful Fever which has of late nearly desolated the cities of America, and some of the principal seaports in the West Indies†.

† The interesting and important question of the contagious nature of the Yellow Fever continues to be agitated as keenly at the present moment, as it was when the above passage was written twenty years ago. The circumstances which have led to this discrepancy of opinion are luminously and satisfactorily explained by Sir Gilbert Blane, in his Elements of Medical Logic.—A. S.

joints, ophthalmia, deafness, cough, dyspnœa, diarrhœa, anasarca, hydrothorax. This was exemplified in the warm summer of 1796 (see pages 159 and 162). The extent of the disease seemed greater, though its fatality was less, in the present year. According to the Bills of Mortality, there died, of the Small-pox, in May 59 persons; in June 78; in July 188; in August 279; in September 576; in October 335; in November 315.

Having given the report of cases admitted into the Small-pox Hospital for 1796 and 1797, (see pages 183 and 250,) I will here put down the numbers admitted in the succeeding years. During the year 1798, there were admitted, in the natural Small-pox, 265: inoculated 2322, of whom 3 died. During the year 1799, admitted in the natural Small-pox 181: inoculated 2342, of whom 4 died. From the 1st of January to the end of March 1800, admitted 35; from the 1st of April to the 29th of September, admitted, in the natural Small-pox, 128: inoculated within the same period 1133, of whom only 2 died. The cases of natural Small-pox were so virulent, during the hot months, that nearly one-third of them proved fatal.

Few acute diseases, it was before observed,

made their appearance while the weather continued hot and dry: but, in consequence of the rain, and sudden change of temperature, after the 19th of August, the scene was immediately changed, and presented a new series of epidemic complaints, which took place with an unexampled violence of symptoms. The disorders were Catarrh, Sore-throat, Pleurisy, Peripneumony, Inflammation of the liver and intestines, Agues, Hæmorrhagies, Diarrhœa, Cholera, and, finally, the Dysentery. The Erythematic Sore-throat is characterized by a strong redness of the tonsils, palate, tongue, and back of the fauces; likewise of the velum pendulum and uvula, with a considerable elongation of them. There is always a weak, quick, and tremulous pulse, general debility, loss of appetite, and a morbid degree of sensibility as to light, sounds, &c. The complaint is often attended with a dryness and stoppage of the nostrils, likewise with pain and deafness in one or both ears, and with discharge of matter from them. It was farther, during the present season, attended with a swelling of the tongue, especially of its under-side: patients in this situation felt as if the tongue had been wrapped round with cloth or velvet.

Some of the cases terminated by slight suppuration, others by a discharge of lymph, or of lymph mixed with blood. The Erythematic Sore-throat, which is often merely the prelude to the Aphthous Sore-throat formerly described, is, like it, contagious, and affects persons who have previously had the Scarlatina anginosa. The proper regimen, for the Erythematic and Aphthous Sore-throat, is stated page 225. Leeches, blisters, antimonials, and purgatives, seem detrimental; while, in the former species at least, the use of bark and the mineral acids may be in general adopted with a certainty of relief.

The Cholera was a frequent disease in September, but particularly so after the rains on the 19th and 20th of August. To a profuse discharge of green bile from the stomach and intestines, cold sweats, fainting, and hiccough, were superadded most painful cramps of the muscles of the lower extremities. The trunk of the body was similarly affected, being jerked from side to side by sudden and violent convulsions. Dr. Sydenham has mentioned the same circumstances in Cholera after the hot summer of the year 1676. "Exeunte æstate Cholera Morbus epidemicè jam sæviebat, et insueto tempes-

tatis calore evectus, atrociora convulsionum symptomata, eaque diuturniora secum trahebat quàm mihi priùs unquam videre contigerat. Nequè enim solum abdomen, uti aliàs in hoc malo, sed universi jam corporis musculi, brachiorum crurumque præ reliquis, spasmis tentabantur dirissimis, ita ut æger è lecto subindè exiliret, si fortè extenso quaquaversum corpore eorum vim possit eludere." Epist. 1.

In the case of Tetanus, which occurred at the beginning of July, there had not been any accident or local injury whatever. The only previous circumstance, likely to have contributed towards the formation of the disease, was distress of mind. Besides a complete locking of the jaw, there seemed to be a painful rigidity in all the muscles of the neck, while the head was firmly and permanently retracted. The patient was a female, thirty-two years of age, in a debilitated state of constitution: her pulse was obscure and irregular: she had no desire for nourishment; neither could any evacuations be produced from the bowels. After being exhausted with pain, tremors, watchfulness, delirium, and strong perspirations, she died on the eighth day of the disease.

The commencement of the Epidemic Dysentery was sudden and violent: it took place usually after some imprudent exposure to cold, or damp air, with most excruciating pain at the lower part of the bowels, heat, thirst, nausea, vomiting of green bile, perpetual forcing or straining to discharge the feces, with numerous but small evacuations. A considerable degree of fever appeared in the worst cases, and continued from eight to twelve days: the pulse was 100 in the morning, and 120 in the evening: all the upper surface of the tongue was covered with a whitish incrustation, through which many of the enlarged papillæ seemed to penetrate; and the fauces were often of a dark red colour. The stools were liquid, and, at first, wholly without fetor: they were sometimes clear and gelatinous; sometimes like ragged pieces of skin, or strings of a reddish colour, suspended in water; sometimes consisting only of blood having a froth on the surface; sometimes of blood mixed with the other appearances. The constant pressing and exertion to evacuate these matters made the rectum exquisitely painful and tender, caused heat and difficulty in making water, and produced so great a degree of debility, with

faintness, that many patients became incapable of using a bed-pan, and, therefore, lying motionless, discharged the feces on cloths. The pain gradually extended upwards to the stomach; the whole abdomen becoming sore and tense, so that not the slightest pressure could be borne upon it. I scarcely ever recollect to have seen, in any complaint, a stronger expression of agony than this disorder occasioned, during the first ten days of its course. Besides the increase of pain after every stool, there was, in several cases, a periodical aggravation of it for three or four hours every forenoon. The nights were, at the same time, sleepless, feverish, and agitated: there was likewise a constant flushing of the face, with coldness of the lower extremities. No respite from pain and fever was obtained till the usual fetor took place in the discharges from the bowels. Immediately after this change, a considerable quantity of black, or dark-coloured, feculent matter, highly offensive both to the sight and smell, was evacuated. Similar stools continued to pass, at intervals, for several days: at length the discharge became nearly of the usual colour and consistence; but was occasionally intermixed with blood, or mucus, when there

was also a return of griping, tenesmus, &c. The duration of the disease was, in some instances, three weeks; in others, five or six weeks. When the violent grinding pain ceased in the bowels, pains were felt about the upper part of the thighs; sometimes in the shoulders or arms: sometimes the stomach alone was affected with pain periodically. The white fur on the tongue, produced by the primary fever, was, in the second or third week of the disease, succeeded by a shining, smooth, rose-coloured appearance, and slight tumefaction of the tongue, finally terminating in aphthous ulcerations. A few patients, after all the dysenteric symptoms were removed, became hectical, emaciated, and dropsical, neither recovering appetite nor strength in less than ten weeks.

This Epidemic having been described under its severest form, it is proper to observe, that many cases were much more slight, being without fever, and only marked by griping pains at intervals, tenesmus, and numerous liquid stools, occasionally streaked with blood. Such likewise are the usual symptoms of the sporadic Dysentery, which occurs almost every autumn, and of which cases have been often noted in the foregoing pages.

Neither in the present, nor at any preceding period, has the Dysentery in London appeared to be contagious. It affords me satisfaction to add, that I never yet saw a fatal case of it*.

No advantage seemed to accrue, in this disease, from the repeated application of leeches to the abdomen. Fomentations afforded no relief, but seemed rather to be detrimental. The only mode of mitigating the pains, and shortening the duration of the complaint, was by giving, alternately, purgatives and opiates. Of the former, I chiefly employed vitriolated magnesia, oleum ricini, and calomel. Their operation was attended with a great, though temporary, aggravation

* In a lady, who was very severely affected, and whose house was adjoining to Spa-Fields, a fatal turn had nearly been given to the complaint, by a circumstance unusual at the outskirt of a populous city. Soon after midnight, a brown owl began to hoot and flap its wings, loudly and violently, on the outside of her chamber-window, whence it could not be dislodged without some difficulty. The omen was, however, averted, my patient being now restored to perfect health. Owls, during their midnight revels in the country, when any solitary light appears, as in a sick room, fly to it, and often invite their fellows thither by loud cries, to the great terror of superstitious cottagers. London owls, which are brought up tame by gardeners, may be supposed to have nearly the same habits as their rustic brethren.

of pain and straining, insomuch, that patients could not be induced to take the same medicine twice: it was therefore necessary either to give them in succession, or under different forms. Strong doses were likewise requisite, in order to produce stools of the usual smell and consistence: and, unless this effect took place, the patient was made to suffer without any advantage. Neither did opiates afford rest, or the least alleviation of pain, if not prescribed in the strongest form. After a purgative had been administered, it was necessary to give a draught, with twenty or twenty-five drops of the tincture of opium, early in the evening, and to repeat it every three hours, in order to secure some quiet during the night, and a respite from the morning exacerbation. I gave the opiates every night, but seldom found that a purgative medicine could be borne oftener than every second or every third day.

In the cases of Hepatitis there was some swelling, and tension, on the right side of the abdomen, with a deep-seated pain, a small, but not quick, pulse, great costiveness, frequent vomiting of green bile, extreme debility and languor, thirst, and total loss of appetite. The urine, when first made, was of a dark-

brown colour, but, after it had stood a few hours, deposited a black sediment. All the cases put down terminated fatally. Leeches, blisters, calomel, effervescing draughts, &c. did not appear to produce any beneficial effect. Indeed, on former occasions, I have observed whenever urine of a blackish colour has been united with the train of symptoms above-stated, whether in Hepatitis or Cholera, the cases have been always fatal.

Pemphigus*, or the Vesicular Fever, is a

* The case of disease here described is erroneously classed under the head of Pemphigus, and should be referred to that of Eczema Mercuriale, as will appear from the following passage extracted from Mr. Pearson's "Observations on the Effects of various Articles of the Materia Medica in the cure of Lues Venerea" (pp. 180, 181); for the notice of which the editor is indebted to the friendly attention of that gentleman.

"My friend, Dr. Willan, has favoured me with the following explanation respecting a case of the Eczema Mercuriale, which appeared under a different title in his Reports on the Diseases of London."

'A case of the Eczema Mercuriale was noted by mistake as a case of Vesicular Fever, in my Reports on Diseases in London. The reason of the mistake will appear from Dr. Murray's Account of Diseases,—British Magazine, Vol. ii. p. 250.

He (Dr. Murray) says, "In one of the cases of continued Fever this month, an eruption of vesicles took place, some of them as broad as a shilling, &c. &c. In forty-eight hours from

rare disease in this country (see page 281-2). The solitary instance of it, noted in July, was a young woman, about twenty years of age, teacher in a school at Walworth, and of a weakly constitution; she had taken some mercurial remedies, for a glandular swelling,

the first eruption of the vesicles, the fluid which they contained was re-absorbed, and not a vestige of them remained.

"The case of Pemphigus, mentioned in last month's Report, appeared to originate from the action of mercury on the system of a delicate female. The vesicles were universal, attended with inflammation of the skin, and occasioning fever and severe pain," &c. &c.

'The first case I considered as an instance of the Vesicular Fever, described by some German physicians. As the patient was under the care of Dr. Murray, then my colleague at the Public Dispensary, I requested him to favour me with a particular account of the case. Through some misapprehension, however, he transmitted the latter case, which I, relying on Dr. M.'s accuracy, sent to the press, without sufficient examination.'

It may be proper to remark, that throughout the series of these Reports, the mention of Pemphigus occurs in two other instances (pp. 272, 278) only, in which it is noticed as affecting infants. Dr. Willan in another Work (On Cutaneous Diseases, page 539,) observes, that "The Pemphigus infantilis, though different in appearance, is certainly analogous to the Erysipelas of infants, (vide lib. cit. p. 503,) and seems to originate from the same causes." He expresses some doubt whether there be an idiopathic disease answering to the descriptions of Pemphigus in medical writers, and states distinctly that he had never seen a case of it; (pp. 523, 543.)—A. S.

three weeks before her eruptive complaint appeared. It began with a violent heat and itching at one of her elbows: the other was soon after affected, when both arms swelled up to the shoulder, and, within two days, they were covered with vesications. The vesicles soon broke, and discharged an acrimonious lymph, which blistered where it fell. Similar vesicles arose, in a day or two, on the face, the scalp, the trunk of the body, the limbs, the palms of the hands, and the soles of the feet. They were small and close together, so that, after they were broken, nearly the whole cuticle was detached. The fever, and the eruptive stage of the disorder, lasted, on the whole, about eight days. During that time, the patient was weak, irritable, and tremulous, her pulse being generally 132: she had no appetite, got but little rest, and was sometimes delirious. Her face was scabbed all over, as in the confluent Small-pox. Before a new cuticle was formed on the trunk of the body, there was a thin incrustation, which gradually peeled off in dry, yellowish scales; but a fresh discharge and a new incrustation repeatedly took place. The skin of the legs was red and tender, and appeared as if studded with miliary pustules,

which, breaking, discharged their lymph, and were succeeded by others. At the end of the third week, the skin of her fingers and toes came off entire, together with the nails. Three weeks more elapsed before the cuticle was restored so that she could stir out of her bed. I saw her, on the first of October, free from complaint: her nails were then renewed; her hair, which had at first partly fallen off, was become thicker; the skin of her neck, arms, and legs, appeared rough, papulated, and scaly, as in a slight kind of the Dry Tetter; her eyes remained weak and tender, as they had indeed been from the commencement of the disorder.

ACCOUNT OF DISEASES IN LONDON,

From the 30th of September to the 25th of December.

List of the Febrile Diseases which occurred in my own Practice.

Contagious, malignant Fever	82	Erysipelas	5
Small-pox	14	Catarrh	66
Scarlatina	8	Acute Rheumatism	12
Measles	7	Gout	2
Hooping-cough	1	Otalgia	2
		Inflammatory Sore-throat,	4

Erythematic and Aphthous Sore-throat	7	Ephemera	8
Pleurisy	5	Cephalalgia	8
Peripneumony	10	Urticaria febrilis	1
Inflammation of the bowels	2	Cholera	4
Peritoneal Inflammation,	1	Dysentery	14
Hepatitis	2	Bilious vomiting, and Diarrhœa	27
Epistaxis	1	Acute Diseases of Infants,	26
Apoplexy	1	Child-bed and Milk Fevers	5
Hæmoptoe	5	Hectic and Slow Fever	17
Hæmatemesis	1		
Intestinal Hæmorrhagy,	2	Quotidian	2
Abortus, and Menorrhagia	5	Tertian	1
		Hemicrania	4

The weather, in October and November, was remarkably fine and mild, the wind being generally west, north-west, or south-west, with occasional showers of rain; the medium altitude of the thermometer about 55°. Accordingly, during six weeks, from the beginning of the former month to the middle of the latter, the inhabitants of this city, and its environs, were more free from diseases than has been known, at the same season, for many years past. The Small-pox and Scarlet Fever gradually declined; the Measles and Hooping-cough disappeared. Fevers were less numerous, but continued from infection; and the Dysentery was not

so extensive, nor attended, except in a few cases, with symptoms so violent as during the month of September. At the latter end of November, and beginning of December, when the temperature of the air frequently varied, there being alternations of wet days, with frosty nights, the series of complaints, usual at the approach of winter, commenced, viz. Rheumatism, Erysipelas, Catarrh, Phthisis, Hæmorrhagy, Diarrhœa, Inflammation of the lungs, bowels, &c. The Erythematic Sore-throat was likewise prevalent, but not attended with any symptoms different from those stated in the last report. It terminated, in one case, by an Hemicrania, which commenced daily at nine o'clock A.M. with a slight shivering, and went off, with a considerable degree of faintness, at five o'clock in the afternoon.

As the autumnal season always favours the progress of infectious diseases, (see page 217,) and much increases pulmonic complaints, the inhabitants of London should be more especially careful to avoid contagion from the beginning of September, till there be settled, frosty weather; and regularly to put on their winter dresses by the first of October.

Coughs and Consumptions are produced, independently of the variations in temperature, or of the smoky, clogged atmosphere of London, and often rendered inveterate by different employments injurious to the lungs. Thus hair-dressers, bakers, masons, bricklayers' labourers, laboratory-men, coal-heavers, and chimney-sweepers, are liable to be affected with obstinate pulmonic diseases; as are also, in an equal degree, the dressers of flax and feathers, and the workmen in the warehouses of leather-sellers*. Many persons, thus engaged, struggle with a constant, hard, troublesome cough, until it terminate in consumption, whereas, by a timely removal into purer air, and a suitable regimen, they might soon have been restored to health†.

* The workmen employed by sugar-bakers use great exertions, are exposed to strong heat, and often drink immoderately. They are liable to Colds, with other Pulmonic Disorders, and to the Rheumatism. By persevering in the work for a long time, they become sallow, emaciated, and dropsical, and die at an early period of life.

† The extractum papaveris albi may be mentioned as an useful palliative in Consumptions, and in tickling Coughs, which remain after the inflammatory stage of Catarrh. This remedy is, I believe, generally given in doses too small to produce any effect: and, therefore, I think it not amiss to

Indigestion, with acidity, flatulence, nausea, pain, and distention of the stomach, arises from other causes besides those which have been mentioned hitherto. In some, the fatigue and anxiety, annexed to the extensive trades carried on in London, produce disorders of the stomach: in others, irregularity as to the quality or time of their meals, and long fasting, have the same effect. Merchants, bankers, and other men of business, also counsellors, attorneys, and medical practitioners of every denomination, at some seasons of the year, take an early breakfast, and return to a late dinner, perhaps after suffering much for two or three hours, both from cold and hunger, and from uneasy sensations of faintness, sinking, languor, &c. When the digestive powers have thus been previously debilitated, the process of digestion, after a hearty meal, is slow and imperfect. Under such circumstances, it is not less injurious to eat hastily, and to take strong exercise immediately afterwards, than to load the

observe, that a pill, containing five grains of it, should be given every three, four, or five hours, according to the age and constitution of the patient. It may also be prescribed, with advantage, for children in the second stage of the Hooping-cough.

stomach with dinner, tea, and supper, at one sitting, a practice usual among men of business, as well as men of pleasure, and likely, if it be long continued, to entail on both of them diseases to which the class of stomachic medicines, or the salubrious waters of Bath and Cheltenham, will not be able to furnish a certain antidote.

Cutaneous Diseases are often connected with disorders of the stomach, and with the general state of Asthenia, formerly described. They originate in London, on very many occasions, from an habitual neglect of cleanliness in workmen and others. Not only the lungs, but the skin, must be injured by the trades enumerated page 388. And how are the poor, without accommodations for the purpose at home, to clear their bodies from the dirt, dust, and unctuous or adhesive substances, which various employments fasten on them? There being no provision in any part of the metropolis for washing or bathing*, they quietly suffer the penalties annexed to the want of cleanliness, as disagreeable smells, perpetual irritation with chaps and fissures on the skin, boils, and

* The few medicinal baths in London are not applied for the purpose above-mentioned.

eruptions of painful, inflamed pustules, the Itch and Prurigo, the Lepra, the dry Tetter, the running Tetter, the Dandriff, and Scald-head. To plunge into the Thames is difficult and dangerous: we are therefore obliged to tolerate the disgusting and indecent plan of bathing in the New-River, to which hundreds of men and boys repair every fine day in summer, and pollute the water as it flows into our cisterns. It is not, however, this revolting idea which should stimulate us to action: the health and comforts of the poor inhabitants merit a prior consideration. Indeed, all ranks of society would be greatly benefited by the establishment of cold and tepid baths, accessible at a moderate expense; for, by a strange thoughtlessness, most men resident in London, and very many ladies, though accustomed to wash their hands and face daily, neglect washing their bodies from year to year. Hence the perspiration, condensed on the skin, gradually obstructs the exhalant pores, thereby producing various internal complaints, and an universal itching over the surface of the body, to which some delicate sufferers reconcile themselves, by supposing a scorbutic disposition communicated from their progenitors, without any

fault of their own. Itching eruptions on the skin, often denominated Scurvy, or the English Malady, will never be eradicated, until bathing or washing in warm water become general. The introduction of it, however, is not likely to be the work of physicians or philosophers alone. They must first influence those who are the leaders of fashion. Let some of our nobility erect baths, on the Oriental plan, in their spacious mansions, and, by setting an example, induce others to make the practice of bathing habitual. The custom would then soon be adopted in every part of the metropolis: and, I have no doubt, the Governors of the City strictly so called, whose liberality appears on so many occasions, would concur in establishing public baths for the use of manufacturers, servants, labourers, &c. and in providing situations and support for others, to be used by persons of a better rank, at a moderate expense. In all the cities of antient Greece, baths were erected and regulated under public authority. At Rome, splendid edifices of this kind were built for general use, and furnished with aqueducts, by the munificence of wealthy individuals, sometimes on patriotic principles, sometimes with the view of acquiring popu-

larity. Under the emperors there were once 870 baths in the city and suburbs*. The bath of Antoninus Caracalla is said to have been so large that it could accommodate, without inconvenience, 1800 persons at the same time. Many of our rich and public-spirited citizens have singly formed establishments of great utility and extent. How much applause would that liberal man deservedly obtain, who should be the first to adorn the metropolis of his country, and benefit its inhabitants, by the institution here recommended—an institution so necessary for the health and comfort of all!

Although the Oriental and Russian vapour-baths are somewhat different from the thermæ of the Romans, yet their good effects are nearly similar. Mr. Tooke's account of those in Russia is so interesting that I cannot

* Agrippa alone built 170 baths for public use: "Agrippa verò in ædilitate suâ lacus 700 fecit. Adjecit ipse in ædilitatis suæ commemoratione gratuita balinea 170, quæ nunc Romæ ad infinitum auxere numerum." Plin. Nat. Hist. lib. xxxvi. cap. 15.

Those, who desire farther information on the subject of baths, need not trouble themselves to read Vitruvius, Lipsius, &c. They will be satisfied with the treatise of A. R. Sanchez, first physician to the Empress of Russia, in the Memoirs of the Royal Medical Society of Paris, vol. iii.

refrain from copying it: "Russia and Hungary are, at present, the only countries, in this quarter of the world, where it is still the custom to bathe after the manner of the antients. In Russia, particularly, the bath makes so much a part of the system of living, that it is used by people of every age, and in all circumstances: by infants, women at their lying-in, in almost all sicknesses, before and after a journey, after hard work, &c. The bath is a necessary of life so indispensable to the common people, that they frequent it as often as possible, well or ill, at least once a week.

"The public baths in Russia are under the care of the police, and let out to common people on account of the crown: farther than this, the government takes no concern either about their erection or management. They usually consist of mean, wooden houses, situate, whenever it is possible, by the side of a running stream. In the bath-room is a large, vaulted oven, which, when heated, makes the paving-stones lying upon it red-hot; and adjoining to the oven is a kettle fixed in masonry, for the purpose of holding boiling water. Round about the walls are three or four rows of benches, one above another, like

the seats of a scaffold. The room has little light, but here and there are apertures for letting the vapour escape; the cold water that is wanted being let in by small channels. Some baths have an anti-chamber for dressing and undressing; but in most of them this is done in the open court-yard, which, on that account, has a boarded fence, and is provided with benches of planks.

"By far the majority of the baths are constructed as they are here described. In the country, in parts where wood is scarce, they sometimes consist of miserable caverns, commonly dug in the earth, close to the bank of some river. In the houses of wealthy individuals, and in the palaces of the great, they are formed upon the same construction, but infinitely more elegant and convenient.

"The heat in the bath-room is usually at from 32 to 40 degrees of Reaumur, and that greatly increased by the throwing of water, every five minutes, on the glowing hot stones in the chamber of the oven. By this means, the heat often rises, especially on the uppermost bench, to 44 degrees of that thermometer. The bathers lie stark-naked on one of the benches, where they perspire, more or less, in proportion to the heat of the humid

atmosphere in which they are enveloped. In order the better to promote perspiration, and completely to open the pores, they are first rubbed, and then gently flagellated with leafy bunches of birch. After remaining awhile, they come down from the sweating-bench, and wash their body with warm or cold water, and, at last, plunge over head in a large tub of water. Many people throw themselves immediately from the bath-room into the adjoining river, as the youths of antient Rome used to leap into a pond after the violent exercise of wrestling, or roll themselves in the snow in a frost of ten or more degrees. The Russian baths, therefore, are sweating-baths, not the Roman tepidaria and caldaria of a moderate warmth, but very violent sweating-baths, which to a person unhabituated to the practice bring on a real, though a gentle and almost voluptuous swoon. They are vapour-baths, not water nor yet dry sweating-baths: herein they differ from all the baths of antiquity, as well as from those of the modern Orientals; and this is also their essential excellence, that they are beneficial in such a variety of cases where hot-water baths would be useless, or even pernicious. They are salutary baths, as they pro-

mote cleanliness, assist the perspiration, render the skin soft and smooth, &c. and not voluptuous baths, as among the Greeks and Romans. It is not to be doubted that the Russians owe their longevity, their robust state of health, their little disposition to certain mortal diseases, and their happy and cheerful temper, mostly to these baths, though climate, aliment, and habit of living, likewise contribute their share. The great Lord Chancellor Bacon, and other sagacious observers of nature, and of mankind, have lamented, and certainly not without cause, that this bathing has fallen into disuse among the modern nations of Europe, and justly wish the practice back again in all our towns and villages. In fact, when we consider that the old physicians so early introduced into their practice this remedy of nature's own invention, and employed it with such great success; when we recollect that Rome, for five hundred years together, had no physicians, but only baths; and that, to this day, a multitude of nations cure almost all their maladies merely by baths; we cannot avoid regarding the dismission of them as the epoch of a grand revolution which has been wrought in the physical state of the human race in our

quarter of the world. The natural perspiration, the most important of all excretions, must naturally go on better in a body constantly kept soft by bathing. A great number of impurities, which privily lay in us the train to tedious and dangerous distempers, are timely removed ere they poison the blood and the juices. All eruptive diseases are abated by bathing, consequently, then, the Small-pox; and, if this dreadful disorder be actually less fatal in Russia than in other countries, this phænomenon need not be attributed to any other cause than the vapour-baths*."

Observations may now be made, with confidence, on the Vaccine Pock, which has been communicated to more than 30,000 persons, since Dr. Jenner's first publication on the subject. This new mode of inoculation, when properly conducted, affords a decided and permanent security from the infection of the Small-pox. Being thus certain in its effects, it is preferable to the inoculation with variolous matters for several reasons.

First, It requires no tedious preparation.

Secondly, It may be safely performed at

* View of the Russian Empire, page 258.

any season of the year, and at any period of life.

Thirdly, It produces but little pain or fever, and no pustular eruptions.

Fourthly, The disease thus inoculated is not communicable by effluvia, or contagion: it can only be transferred to others by fluid taken from the pock while transparent, and inserted under the skin.

Fifthly, The Vaccine disease has not, in any cases I have seen, been succeeded by glandular swellings, ulcers, cutaneous affections, disease of the lungs, nor any of the appearances (See pages 372-3), which often occur after the Small-pox, whether produced by contagion or inoculation. This circumstance alone, other advantages not being considered, would cast the balance in favour of the Inoculation with the Vaccine Pock.

This mode of inoculating, in its extension over Great Britain, and other countries, must have been often conducted by persons unacquainted with the appearance and course of the disease, some of whom perhaps took the matter they employed at second or third hand. Much confusion, and several disagreeable circumstances have necessarily arisen, which brought the practice into temporary discre-

dit. Within the vicinity of London, unfavourable cases have occurred from the insertion of wrong matter, or of fluid taken from Vaccine vesicles at an improper time, from using impure lancets, from making too large incisions, &c. Medical practitioners, since they had the opportunity of being better acquainted with the form of the Vaccine Pock, of ascertaining the easiest process in inoculating it, and of readily obtaining genuine matter, have seldom fallen into error; nor do we now hear of inflammation, and swelling of the arms, of alarming eruptions, nor of phagedenic ulcers at the decline of the disorder. It has been suggested that the Variolous and Vaccine fluids may contaminate each other, or, by acting on the human constitution at the same time, produce an hybrid disease. This suggestion does not stand the test of experiment. When the two fluids are rubbed together, and inoculated by a lancet dipped into the mixture, sometimes the Vaccine Pock, sometimes a pustule of Small-Pox, has been produced, the genuine characteristics being, in either case, retained throughout*. Farther, when Vaccine and Variolous matter are in-

* Sometimes both diseases will be thus produced.

serted under the skin, so nearly together that the two pustules, thence formed, enlarge till they become one, by inoculating afterwards with the fluid taken from one side of it, the Vaccine pock will alone be produced; whereas the fluid taken from the other side excites a variolous pustule on the arm of the person inoculated, and an eruption of Small-pox, in the usual manner, over the body*. In an adult female, at the Inoculation-Hospital, the casual Small-pox appeared six days after the Vaccine disease had been inoculated, and two variolous pustules arose within the circumference of the Vaccine pock: when these were maturated, fluid taken from them on the point of a lancet, and inoculated into another person produced the regular Small-pox: at the same time, fluid taken from the Vaccine pock, at a little distance from the supervening pustules, gave the Vaccine disease in its genuine form, without any eruption†.

It is now fully ascertained that inoculation with Variolous matter, soon after exposure to the contagion of Small-pox, supersedes the infection, and produces a mild disease. During the last summer, I tried, in two instances,

* Dr. Woodville.

†M r. Wachsel.

whether an immediate inoculation with Vaccine fluid would have the same favourable effect. This plan was not successful, both patients having been affected with the confluent Small-pox, before the vaccine vesicle arrived at its height. Other practitioners, I understand, have been, in like manner, disappointed, whose experience may therefore serve as a caution to their fellow-labourers not to make, unnecessarily, a similar trial in dubious situations. The Vaccine pock, inoculated before the febrile stage of other eruptive diseases, has little or no effect in retarding their progress*, while passing through its own course. Having stated that Vaccine inoculation will not always supersede the natural Small-pox, in persons at the same time exposed to contagion, I may advance another step, and observe, that, if Vaccine and Variolous matter be inoculated at the same time, or within a week of each other, into the same person, the Vaccine pock goes through its regular stages, and the Variolous pustule on the arm, after exhibiting the usual appearances, is succeeded by an eruption of Small-

* This I have observed in a case of Chicken-pox, and in the Measles. The same has been noticed by other practitioners.

pox over the surface of the body. From this fact, which has been confirmed by hundreds of trials, some inferences may be deduced, which are of material importance. 1. That Vaccine fluid should not be taken, for the purpose of inoculation, on a lancet which had been previously employed in inoculating the Small-pox. 2. That the Variolous and Vaccine virus do not interfere with each other's action on the human constitution, while they are merely in progress, without having had their full operation. 3. That the Vaccine Inoculation is not a preventive with regard to the Small-pox, until its course be completed, or, at least, till the inflammation round the Pock be on the decline. From some trials I know that the application of the matter of Small-pox will produce no effect after the ninth day of Vaccine inoculation: the exact time of this process, at which the action of the Variolous virus is precluded, might be ascertained by farther experiments.

What has been above stated is, I think, confirmed by several of the cases in Dr. Woodville's first Report on the Variola vaccina*, and may serve as an answer to various

* See Case 6, 8, 9, 11, 12, 13, 14, 15, 16, 18, 22, 25, 26, 28, 30, &c.

inquiries and speculations on the subject. Few or none of the out-patients of the Hospital, inoculated with the Vaccine pock, have pustules over the body. Dr. Woodville likewise observes, (Observations on the Cow-pox, page 24,) "In my private practice of inoculation for the Cow-pox, which has been very extensive, I have not met with one instance in which any pustules, resembling those of the Small-pox, appeared." My own experience coincides perfectly with this statement: in different families I have seen inoculated with Vaccine fluid, occasionally selected by myself at the Hospital, and taken on new lancets, about sixty persons, none of whom had pustular eruptions*, at the maturation of the pock formed by the puncture. Patients admitted into the Inoculation-Hospital have often pustules on the body, after Vaccine matter has been inserted in the arm, from the following cause: They are mostly persons from the country, who, alarmed on finding some of the inhabitants of the houses where

* In one child, three minute hard tubercles appeared on the fore-arm, about the seventh day, but they subsided in two or three days. This little eruption was merely the Strophulus candidus, described in the Treatise on Cutaneous Diseases, page 32.

they lodge, or visit, affected with the Small-pox, endeavour to anticipate the disorder by means of inoculation, at the asylum opened to them by public benevolence. But the application is probably too late: some of them have already received the infection, and, before the Vaccine pock can reach the end of its second stage, an eruption of Variolous pustules takes place in the usual manner. In attending at the Hospital last summer, while Dr. Woodville was on his mission to Paris, I observed four instances of persons so circumstanced, in whom the eruptions appeared, on different days, between the third and the eighth from inoculation. The pustules were distinct, but large, and full of matter. After their appearance, I thought the tumor, and Erythema, round the Vaccine pock, in one or two patients, did not become quite so considerable, or extensive, as in unmixed cases of Vaccine inoculation. When the Small-pox and Vaccine disease had been inoculated about the same time, the eruptions were, in all the cases I saw at the Hospital, of the species vulgarly termed Horn-pock, being hard, and semitransparent. They contained little fluid, and, though of long duration, did not maturate, or break by suppuration. Whether we should, from these premises, infer

that the two diseases, when communicated together, limit each other's operation on the human body, so that the Small-pox may be checked, or the Vaccine disease be variolated by inoculation, by exposure to an infected atmosphere, &c. or whether, as I before ventured to conjecture, they go through their course, in the same person, at the same time, without influencing each other, must be decided by farther experiments. On this subject, I trust, the physician of the Small-pox Hospital, who has the best opportunity of employing the necessary tests, will use every exertion in his power; and communicate his observations to the public, with his usual candour.

The number of Puerperal cases put down in the foregoing lists, being the result of private and public practice unconnected with midwifery, cannot be supposed to afford any regular proportion between such cases and other diseases. The mortality among childbed women in London is less than many persons have conceived, not one in a hundred dying after delivery. A physician of eminence, in attending 2982 ladies from the year 1786 to 1800 inclusive, lost only 30 of his patients; by sudden and violent Hæmor-

rhagy, 6; premature Labour, 1; Pulmonary Consumption, 3; Lumbar Abscess, 1; Pneumonia, 1; Enteritis, 1; Rupture of the uterus, 1; Scarlet Fever, 4; Convulsions, 4; Apoplexy, with retention of urine, 1; Suddenly, without any previous complaint, 2; Puerperal Fever, 5.

The simple puerperal Fever begins generally on the second or third day after delivery, with slight shiverings and interchanges of heat many times a day, a very quick pulse, and a white tongue, on which the papillæ appear red and enlarged. These symptoms are attended with or succeeded by severe uterine pains, pain and tenderness of the abdomen, vomiting of bile, head-ache, pain between the eyes, or sometimes at the root of the nose, coldness of the feet, a very scanty secretion of milk, delirium, and, in dangerous cases, stupor. The puerperal disease, under this form, may be relieved, in most cases, by the plan formerly recommended for peritoneal Inflammation. (See page 187.) When a Child-bed Fever is epidemic and contagious, the above symptoms are connected with the Scarlatina or malignant Fever. Particular situations and particular seasons favour such a complication, which is usually fatal. Within the period comprized by these Reports, I

have not seen the puerperal and malignant Fever combined; but during the years 1796 and 1797, particularly the latter, very many women, after lying-in, became feverish, and were presently affected with the Scarlatina anginosa. The five fatal cases in the physician's list, page 407, occurred in 1797. He observed, that, a week after the death of two other ladies, apparently from puerperal Fever, the children in both houses took the Scarlet Fever. I understood from other practitioners that many of their patients, about the same period, had the Scarlatina anginosa, with or without a rash, and that the disease proved fatal to more than half of them. Hence we may account for the great number of deaths, under the article Child-bed, in the Bills of Mortality for 1796 and 1797, when compared with those of several preceding, and of the three succeeding years. On farther comparing the Bills of Mortality, at the end of the century, with others published about the middle of it, or in the foregoing century, it will appear that the fatality of puerperal diseases is, on the whole, greatly reduced. Of this point, an abstract from the statement given by the Directors of the British Lying-in-Hospital, will afford another convincing proof.

YEARS.	Proportion of Deaths.	
	Of the Women.	Of the Children.
From Nov. 23, 1749, to Dec. 31, 1758	1 in 42 + $\frac{16}{78}$	1 in 15 + $\frac{108}{216}$
From 1759 to 1768 inclusive	1 in 50 + $\frac{73}{94}$	1 in 20 + $\frac{40}{139}$
1769 to 1778	1 in 53 + $\frac{19}{106}$	1 in 42 + $\frac{74}{134}$
1779 to 1788	1 in 60 + $\frac{53}{91}$	1 in 44 + $\frac{83}{182}$
1789 to 1798	1 in 288 + $\frac{1}{31}$	1 in 77 + $\frac{33}{70}$
In 1799 and 1800	1 in 913	1 in 115 + $\frac{6}{8}$

This Table likewise shews to what extent the lives of infants may be preserved by proper attention and management. Where such attention is paid, neither the mother nor children are affected with miliary Fever, miliary eruptions, Aphthæ, or disorders of the bowels. The poor, who are both ill situated in London, and obliged to return to work soon after delivery, find a minute attention to their own offspring impossible: the devastation among infants is therefore dreadful*. It ap-

* Dr. G. Fordyce, after enumerating the several causes which in his opinion give rise to the mortality, asserts, that "the loss of children in London is more than one half before they attain the fifth year of their age." See Transactions of a Society for the Improvement of Medical and Chirurgical Knowledge, Vol. i. p. 261.

It appears from a more recent estimate, deduced from the Bills of Mortality, by Dr. Clarke, that during a period of forty years, commencing in 1760 and terminating in 1799, out of 836,285 burials, 281,408 were those of children who died before they attained two years of age; and of the remainder 113,393 were of persons who died under ten years. In many of the years comprehended within the above-mentioned period, more than one-third of the whole number of burials was of infants who did not complete their second year. This prodigious mortality in early life is ascribed by Dr. Clarke chiefly to the "severity of the winters, the general variableness of the climate, and the improvident exposure of young children to cold, without

pears from the Bills of Mortality, that one-third of all that are born in London die before they reach two years of age. I can only at present mention this circumstance as a melancholy consideration, not being able to suggest any plan for removing evils of so great a magnitude.

The Puerperal Œdema begins often suddenly with a sensation like the cramp: a violent pain then settles in the groin for some days, but afterwards extends, along the thigh, to the ham, and below it, affecting particularly the calf of the leg. Soon after the pain is felt, the thigh and leg are affected with a considerable swelling, which is not red or inflamed, but pale, shining, and so hard that no pits are left in it from pressure. The inguinal glands are, at first, sometimes enlarged

sufficient attention to clothing," under the mistaken idea of rendering them strong and robust. "All medical men," he adds, "who have attended to the diseases of children, must have observed that those families in which children are least exposed to cold in winter, are generally most healthy, while those who act on the erroneous principle of hardening them by the exposure of their tender bodies to severe weather, are scarcely ever free from disease." Commentaries on the Diseases of Children, pp. 4—12. See also above, p. 319.—A. S.

and painful: the lymphatics may also be traced along the limb, being hard and corded. This disorder occurs as frequently after easy as after laborious parturition, and, in general, affects the left side. In many cases, however, a similar swelling takes place, within eight or ten days, in the right thigh and leg; the pain then ceases in the left, and pits remain after pressure. The œdema is preceded by a very quick and weak pulse, and by an offensive discharge from the vagina. Its duration is five or six weeks. The limb first affected recovers last; and it sometimes remains in a state of weakness for a year after the swelling has subsided. A considerable number of leeches applied to the groin, and upper part of the thigh, at the commencement of the disorder, in many cases relieves the pain, and seems to prevent the sudden enlargement of the limb. It may be remarked, that the Scirrhus, or Cancer of the uterus, which produces an offensive discharge from the vagina, is sometimes attended with an œdema similar to that in puerperal cases*.

Scirrhus of the uterus, and ovaria, occa-

* Dr. John Sims.

sionally affects women who have had children, but is more frequent in those who are childless. However, when only the neck of the womb is in a diseased state, this does not prevent conception. I must observe, that the number of these cases is, for the reason above specified, much greater than the proportion stated in my lists of Chronic Diseases. In noticing such cases I have to lament the deplorable situation to which delicate females, labouring under them, are reduced, and the total inefficacy of cicuta and every other remedy yet proposed for their alleviation. Opium is highly advantageous as a temporary antidote to bodily pains, and wounded sensibility; but how dreadful is the state of those who, by the assistance of this drug alone, can render existence tolerable!

The deaths recorded in the Bills of Mortality, under the article Lunatic, have increased within the last two years. It is supposed, from this and other considerations, that maniacal cases become every day more frequent; but I believe there is no sufficient ground for this opinion. The number of patients in Bethlem, St. Luke's, and other hos-

pitals, is nearly uniform*. Private houses for the reception of lunatics have not, within ten years, been increased: they amount at present to twenty-five, licensed by commissioners, appointed under an act of parliament, with jurisdiction over a circle of seven miles radius, the College of Physicians being the centre. The number of patients, in these houses, varies from 5 to 345. Many of the wretched inhabitants are persons of the lowest rank, admitted at a moderate expense, having injured their constitutions, and destroyed their intellects, by excess in drinking spirits, and by the improper use of mercury. Those of the superior order, whom their friends consign to these mansions of security, are not the victims of disappointed ambition, or of inordinate affections; not dissipated females sunk to ruin by their extravagance, nor men who have suddenly lost their all in the whirlpools of St. James's Street: but residents nearer to the Royal Exchange; some of them shattered by unhealthy climates, some by overstraining

* Seldom amounting to more than 600. These, with the patients confined in private houses near London, do not exceed 2000.

the faculties, both of body and mind, in the acquisition of wealth; some ruined by deceiving, and, perhaps, self-deceived projectors, others by the most daring commercial speculations; and a few whose understanding has been overset by mistaken views of religion. The proportion of individuals is small in whom the disease can be traced to hereditary predisposition, without the intervention of some manifest exciting cause.

Phrenetical cases, of a short duration, were more numerous than usual in August, and the succeeding autumnal months. The disease* affected persons of a debilitated constitution, who had previously had an irregular pulse, and were liable to frequent head-aches. It began with disorder of the bowels, loss of sleep, palpitation, tremors, and most excruciating pain of the head: these symptoms were soon followed by occasional delirium, or confusion of ideas; and, finally, by an incessant raving, which obliterated all corporeal sensations, and by a degree of violence re-

* This phrenetical disorder must be considered as wholly distinct from the violent delirium connected with Fever; page 370. The complaint is not properly noticed or arranged by nosologists.

quiring active coercion. Three patients, out of five, died under these deplorable circumstances, being soon exhausted by the want of rest, and constant agitation. In some, the febrile state ceased at the end of a month; and they regained both their strength and intellect two or three weeks afterwards.

The General Bill of Mortality, for the year 1800, specifies a remarkable increase of deaths from Fevers, and is a collateral proof of the extensive diffusion and virulence of contagious Fevers since the autumn of 1799 (see page 343-4). Their fatality was continued to the end of 1800, no settled frost having taken place in the month of December. The total number of deaths in 1799 was less than that in 1800 by 4934. This last year appears to have been most destructive to infants under two years of age, and to old people; 6657 having died of the former; of the latter, 2219 above 70 years of age. An increased mortality may also be remarked on inspecting, in the last Table, the articles of Consumption and Asthma, Dropsy, Water in the head, Small-pox, Measles, Pleurisy, external Inflammation, and Mortification. Hence it will appear that extremes of heat are not, in this

climate, less detrimental, even in pulmonic diseases, than an extreme degree of cold (see pages 200, 308-9). How much a moderate and uniform temperature contributes to lessen the annual mortality among us, may be seen from Dr. Fothergill's account of the Weather and Diseases in 1751, 1752, 1753, and from the annual Bills for the same, compared with those of the years immediately preceding or succeeding.

On farther comparing the London Bills of Mortality, at the middle and close of the seventeenth century, with those of the eighteenth century, it will appear:

First, That continued and intermittent Fevers were much more fatal, in proportion to other complaints, formerly, than at present.

Secondly, That the Dysentery, and other disorders of the bowels were, 150 years ago, attended with a greater degree of fatality than we now experience.

Thirdly, That the deaths from Convulsions must be referred chiefly to infants; chrisoms and infants having been gradually resolved into the article of Convulsions (see page 211).

Fourthly, That Croup* is an article but of very modern date.

Fifthly, That the articles of Cough, Consumption, and Asthma, or Hydrothorax (termed Stoppage in the stomach), have at all times predominated.

Lastly, it will appear, although the population of London must be supposed increasing, that the annual mortality has, in fifty years, been greatly diminished. This may be referred partly to the numerous improvements made in the City, which have contri-

* The denomination is perhaps incorrect: I have only seen three cases of the disease†, properly so called, in twenty years. It affects infants, or very young children, to whom it is suddenly fatal, by producing, in the trachea, an inflammatory crust, which obstructs respiration. The formation of this crust may be sometimes prevented by a quick emetic, and by applying leeches immediately afterwards.

† No mention of Croup occurs in the Bills of Mortality before the year 1793, when twelve cases are recorded. During a period of five years comprised in these Reports, viz. from 1796 to the end of 1800, the aggregate number of deaths from this disease, stated in the Bills, is 80: within the last five years, ending December 1820, it has increased to 509.

The very few Croup cases seen by Dr. Willan, correspond in number with those which Sir Gilbert Blane has noted, as the result likewise of twenty years public and private practice in the metropolis. See his Paper on the Prevalence, Mortality, and Treatment of different Diseases, in the Medico-Chirurgical Transactions, Vol. IV.—A. S.

buted to preserve the health of its inhabitants: but partly I trust to the more accurate application and greater certainty of the medical art in the treatment of diseases, by attaining which our profession has been rendered more extensively beneficial to mankind.

Abstract of the Bills of Mortality, from the Year 1650 *to* 1656 *inclusive.*

Diseases.	A. D. 1650.	1651.	1652.	1653.	1654.	1655.	1656.
Apoplexy and suddenly.....	74	106	111	118	86	92	102
Purples and Spotted Fever.....	65	54	60	75	89	56	52
Ague and Fever.....	970	1038	1212	282	1371	659	875
Bloody Flux, Scouring, and Flux,	289	833	762	200	386	168	368
Cancer, Gangrene, and Fistula...	19	31	53	36	37	73	31
Chrisoms and Infants.....	990	1237	1280	1050	1343	1089	1393
Convulsions.....	493	569	653	606	828	702	1027
Cough and Consumption.....	1988	2350	2410	2286	2868	2606	3184
Flox and Small-pox.....	184	525	1279	139	812	1294	823
French Pox.....	18	21	20	20	20	29	23
King's Evil.....	19	22	20	26	26	27	24
Gout.....	9	7	7	5	6	8	7
Lethargy.....	4	4	4	3	10	9	4
Lunatic.....	11	7	11	9	12	6	7
Measles.....	33	33	62	8	52	11	153
Pleurisy.....	20	23	19	17	23	10	9
Quinsy and Sore-throat.....	17	24	20	18	9	15	13
Swine Pox.....	—	—	—	1	4	2	1
Total Mortality..	8,764	10,467	12,604	10,087	13,247	11,377	13,921

Abstract of the Bills of Mortality, from the Year 1696 *to* 1700 *inclusive.*

Diseases.	A. D. 1696.	1697.	1698.	1699.	1700.
Ague and Fever	2775	3111	3343	3505	3676
Apoplexy and suddenly	109	117	116	106	104
Bleeding, Bloody Flux, and Flux	13	16	25	21	18
Child-bed	232	293	169	244	240
Chrisoms and Infants	102	85	59	70	78
Convulsions	4480	4944	4480	4513	4631
Consumption and Tissic	3471	3820	3583	3351	2819
Evil	88	71	59	64	83
Flox, Small-pox, and Measles	196	634	1813	890	1031
French Pox	76	59	66	64	69
Gout, Cramp, and Sciatica	18	16	14	13	15
Lethargy	11	7	7	6	5
Lunatic	4	27	19	20	35
Palsy	17	27	21	24	31
Pleurisy	14	42	32	25	30
Quinsy	9	9	10	10	10
Rickets	426	522	278	306	393
Spotted Fever and Purples	102	137	274	306	189
St. Anthony's Fire	7	9	4	4	9
Teeth	1225	1353	135	2268	1159
Total Mortality..	18,638	20,970	20,183	20,795	19,443

Abstract of the Bills of Mortality, from the Year 1746 *to* 1752 *inclusive.*

Diseases.	A. D. 1746.	1747.	1748.	1749.	1750.	1751.	1752.
Aged	2424	2010	2127	1983	1896	1688	1263
Ague	15	8	9	15	11	7	2
Apoplexy and suddenly	253	194	222	239	227	208	178
Asthma and Tissic	553	416	599	410	468	427	289
Bleeding	4	3	5	8	3	7	3
Bloody Flux	21	6	10	7	8	3	3
Cancer	50	47	40	35	46	46	53
Canker	3	4	6	6	4	4	6
Child-bed	188	207	197	187	228	172	156
Colic, Gripes, &c.	119	160	111	148	145	114	123
Consumption	4887	4562	4487	4623	4543	4182	3558
Convulsions	6952	6783	5948	6128	5837	5594	5431
Cough, and Hooping-cough	95	151	150	82	55	275	188

Diabetes	—	3	2	1	1	—	—
Dropsy	1196	1133	1012	1036	1051	1000	680
Evil	20	17	9	16	14	14	21
Fever, malignant Fever, Scarlet Fever, Spotted Fever, and Purples	4167	4779	3981	4458	4294	3219	2070
Fistula	14	13	5	5	8	8	17
Flux	40	28	47	38	24	21	10
French Pox	100	69	73	73	73	75	54
Gout	60	52	47	48	59	38	40
Gravel, Stone, and Strangury	24	31	32	22	30	28	28
Headmouldshot, Horse-shoe-head, and Water in the head	148	150	93	116	107	115	85
Jaundice	130	139	164	147	186	121	115
Imposthume	19	12	20	18	17	13	17

Bills of Mortality, from the Year 1746 *to* 1752 *inclusive, continued.*

Inflammation	88	53	34	40	41	38	33
Itch	6	6	5	1	5	2	—
Leprosy	5	6	7	2	5	3	3
Lethargy	4	3	6	9	11	10	8
Livergrown	2	1	1	2	1	—	2
Lunatic	90	53	59	62	66	76	69
Measles	250	81	10	106	321	21	111
Miscarriage	3	6	7	3	3	4	5
Mortification	251	227	231	201	259	225	199
Palsy	61	52	80	86	105	75	80
Pleurisy	43	31	76	36	34	26	23
Quinsy	17	24	18	13	16	10	8
Rash	3	8	6	6	4	6	2
Rheumatism	22	10	7	20	21	20	6
Rickets	39	36	15	25	21	23	11
Rising of the Lights	5	4	—	5	1	5	4
Scald-head	2	1	2	5	1	1	3

Sore-throat	1	6	5	3	7	3	3
St. Anthony's Fire	1	4	—	4	3	4	4
Small-pox	3236	1380	1789	2625	1229	998	3538
Scurvy	3	5	5	5	4	7	5
Sores and Ulcers	28	28	18	13	22	27	15
Stoppage in the stomach	102	81	38	32	10	9	10
Surfeit	5	5	3	3	—	—	1
Swelling	3	3	1	1	3	4	5
Teeth	1309	1283	1064	1147	1109	1053	968
Thrush	121	144	94	152	111	95	99
Tympany	2	—	1	3	3	4	2
Vapours	2	—	1	—	1	—	—
Vomiting and Looseness	7	11	11	6	8	8	5
Worms	12	8	2	9	5	10	7
Total Mortality...	28,157	25,494	23,869	25,516	23,727	21,028	20,485

Abstract of the Bills of Mortality, from the Year 1795 *to* 1800 *inclusive.*

Diseases.	A. D. 1795.	1796.	1797.	1798.	1799.	1800.
Abortive and Still-born.....	738	761	645	594	580	492
Abscess and Imposthume...	42	27	25	26	28	37
Aged.....	1637	997	1283	1117	1343	1742
Ague.....	10	6	5	8	3	2
Apoplexy and suddenly.....	220	225	214	224	249	252
Asthma and Phthisic.....	950	326	538	426	674	809
Bedridden.....	15	8	6	2	2	3
Bleeding.....	17	16	11	22	16	9
Bursten and Rupture.....	16	19	18	18	20	15
Cancer.....	79	66	97	17	48	58
Chicken-pox and Swine-pox	2	2	9	—	2	2
Child-bed.....	142	202	198	144	131	164
Colds.....	56	11	15	4	14	27
Colic, Gripes, &c.....	8	14	5	13	8	11

Consumption	5735	4265	4767	4533	4843	5721
Convulsions	4758	3798	3804	3663	3794	4512
Cough and Hooping-cough,	311	536	367	418	451	380
Cow-pox	—	—	—	—	—	1
Croup	17	23	14	14	16	13
Diabetes	1	—	—	1	1	—
Dropsy	997	727	832	784	906	1003
Evil and Rickets	4	7	2	5	5	6
Falling Sickness and St. Vitus's Dance	—	1	1	—	1	—
Fevers of all kinds	1947	1547	1530	1754	1784	2712
Fistula	5	3	7	3	3	6
Flux, Vomiting, and Looseness	13	9	12	12	5	11
French Pox	22	22	24	39	23	27
Gout	116	109	114	111	91	105
Gravel, Stone, and Strangury	26	32	28	16	11	16
Grief	6	6	3	7	4	5
Head-ache	1	4	5	—	—	2

Bills of Mortality, from the Year 1795 *to* 1800 *inclusive, continued.*

Headmouldshot, Horse-shoe-head, and Water-in the head	81	72	67	67	76	82
Jaundice	56	72	64	69	78	67
Jaw locked	1	2	3	2	1	1
Inflammation	466	368	389	384	433	593
Itch and Leprosy	1	—	2	1	3	1
Lethargy	2	4	3	1	—	2
Livergrown	3	2	2	7	10	3
Lunatic	91	87	94	83	107	162
Measles	328	307	222	196	223	395
Miscarriage	6	—	10	2	3	4
Mortification	262	207	206	262	226	242
Palpitation of the heart	1	—	—	1	2	2
Palsy	76	73	99	86	105	122
Pleurisy	11	14	14	15	14	37
Quinsy	2	4	4	5	1	1
Rash	—	1	1	—	1	1

Rheumatism	3	4	4	3	3	5
Scurvy	4	3	3	4	3	5
Small-pox	1040	3548	522	2237	1111	2409
Sore-throat	23	21	12	12	12	1
Sores and Ulcers	5	10	11	11	12	8
Spasm and Cramp	6	1	—	2	3	5
St. Anthony's Fire	1	4	2	4	—	—
Swelling	—	3	4	—	—	—
Teeth	495	361	359	370	335	414
Thrush	61	50	46	49	35	33
Worms	18	12	4	3	11	15
Total Mortality	21,179	19,288	17,014	18,155	18,134	23,068
Died under two years of age	6466	6772	5111	5728	5211	6657
Died upwards of one hundred	4	3	4	2	2	8

1796.	Six's Thermometer without.			Thermometer without.			Thermometer within.			Barometer.			Hygrometer.			Rain.
	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	
	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Inches.	Inches.	Inches.	Deg.	Deg.	Deg.	Inches.
January.....	56	36	47,3	55	38	47,5	62	51	57,2	30,32	29,00	29,72	86	73	79,3	2,128
February....	56	30	41,7	55,5	30,5	41,7	58,5	51	55,0	30,31	29,05	29,81	86	66	76,3	1,143
March.....	60	26,5	41,0	59	27	41,4	60	47	54,0	30,44	29,50	30,03	84	58	70,7	0,074
April.....	70	36	50,9	68,5	39	51,4	64,5	55	59,8	30,32	29,08	30,04	82	59	70,4	0,302
May	65	39	52,7	64	44	54,0	63	57	60,4	30,22	28,94	29,73	85	63	71,4	2,301
June.....	80	45	58,8	78	49	59,8	68,5	59	62,2	30,31	29,44	29,96	83	59	69,7	0,536
July.....	77,5	44,5	61,2	76,5	50	62,0	67	60	64,1	30,18	29,37	29,79	86	61	71,2	1,904
August.....	80	48,5	62,5	80	52	63,7	72	64	67,2	30,41	29,71	30,06	83	59	71,5	0,529
September...	79,8	45	61,9	78	46	61,4	72	61	66,1	30,28	29,46	29,96	88	65	75,1	1,541
October.....	59	30	48,7	59	32	48,9	61	54,5	57,8	30,55	29,17	29,94	86	65	77,2	1,803
November...	57	29	42,2	57	29	42,2	60	50	54,3	30,29	29,18	29,83	88	68	80,0	1,209
December...	51,5	4	32,1	49	5	32,1	53	43	47,5	30,51	29,24	29,83	90	73	81,9	1,309
Whole year,			50,1			50,5			58,8			29,89			74,6	14,779

1797.	Six's Thermometer without.			Thermometer without.			Thermometer within.			Barometer.			Hygrometer.			Rain.
	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	
	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Inches.	Inches.	Inches.	Deg.	Deg.	Deg.	Inches.
January	49	25	37,3	49	25	37,7	56	45	51,2	30,50	29,52	30,09	90	69	85,1	0,960
February ...	50	24,5	37,5	50	25	37,9	57	50	53,3	30,62	29,37	30,31	88	67	81,1	0,219
March	54	27,5	39,9	54	29	40,2	59	51	54,3	30,48	29,44	29,94	86	60	76,6	0,777
April.....	65	34	47,4	65	35	47,8	62	55	57,8	30,13	29,10	29,77	87	63	77,3	1,859
May	79	34	53,8	78	40	55,4	68	56	61,5	30,33	29,38	29,89	90	61	75,1	1,436
June.....	73	40	57,5	73	45	58,6	65	59	61,8	30,29	29,36	29,86	85	64	74,3	4,223
July.....	85	48	65,8	84	55	66,7	74	62	67,4	30,25	29,51	29,96	83	64	74,6	1,288
August.....	76	48	61,9	76	52	62,6	69	63	66,1	30,18	29,48	29,87	88	66	76,4	2,789
September...	71	42	56,9	69	45	57,5	67	60	62,2	30,14	29,04	29,75	90	65	79,3	4,061
October.....	63	35	49,0	62	35	49,6	62	53	57,5	30,31	29,05	29,83	90	67	81,3	2,001
November ..	57	27	43,3	57	27	43,4	59	49	55,0	30,48	29,14	29,92	91	73	85,0	1,473
December...	56	29	42,7	56	30	43,0	60	49	54,9	30,46	29,07	29,80	91	70	84,5	1,611
Whole year,			49,4			50,0			58,6			29,92			79,2	22,697

1798.	Six's Thermometer without.			Thermometer without.			Thermometer within.			Barometer.			Hygrometer.			Rain.
	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	
	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Inches.	Inches.	Inches.	Deg.	Deg.	Deg.	Inches.
January.....	53	28	39,6	53	29	40,1	59	49	53,5	30,52	28,96	29,94	90	73	82,8	1,105
February....	54	24	39,9	54	24	40,1	58	49	54,2	30,76	29,23	30,11	90	71	82,2	0,693
March	58	30	42,9	58	30	42,9	61	50	55,4	30,37	29,18	29,93	90	68	79,8	0,333
April.....	69	30	51,6	69	31	52,7	66	53	59,8	30,38	29,27	29,96	—	—	—	0,517
May	76	43	56,5	75	46	57,3	66	58	60,6	30,44	29,11	30,00	69	30	51,4	1,621
June.....	86	47	64	86	51	64,8	71	62	65,8	30,42	29,65	30,07	69	32	50,1	0,960
July.....	78	51	63,9	76	54	64,4	72	64	65,9	30,17	29,36	29,80	74	38	55,8	2,879
August	83	52	65,6	82	55	63,9	72	66	68,5	30,35	29,70	30,09	70	41	—	1,525
September ..	76	44	58,9	76	45	59,2	70	58	64,2	30,26	28,97	29,78	73	37	—	2,437
October.....	64	32	51,8	63	33	52,4	63	57	60,7	30,39	29,16	29,90	82	45	—	3,428
November ...	60	25	41,6	60	25	42,4	62	48	55,4	30,27	28,69	29,58	93	57	—	3,056
December...	50	11	35,2	50	14	35,5	57	38	50,3	30,58	29,27	29,90	95	53	—	0,857
Whole year,			51,0			51,3			59,5			29,92				19,411

1799.	Six's Thermometer without.			Thermometer without.			Thermometer within.			Barometer.			Hygrometer.			Rain.
	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	Greatest height.	Least height.	Mean height.	
	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Deg.	Inches.	Inches.	Inches.	Deg.	Deg.	Deg.	Inches.
January.....	50	20	35,1	50	23	35,6	55	41	49,0	30,43	29,25	29,98	86	61	79,1	0,949
February....	56	18	38,2	56	22	38,7	60	42	51,0	30,26	28,88	29,70	92	57	75,2	2,235
March.....	56	28	39,3	56	28	39,4	62	49	53,6	30,23	29,31	29,84	—	—	—	0,433
April.....	59	28	44,1	56	30	44,7	58	47	54,3	30,23	28,75	29,62	—	—	—	1,671
May	70	36	52,4	70	40	53,2	62	54	58,7	30,38	29,33	29,84	—	—	—	1,749
June.....	77	43	58,1	77	49	59,4	67	58	62,1	30,41	29,18	30,04	—	—	—	0,552
July.....	77	48	62,3	77	52	63,1	68	62	64,9	30,18	29,22	29,82	—	—	—	2,913
August.....	73	47	60,4	72	51	61,1	66	62	63,3	30,12	29,26	29,81	78	45	59,8	2,209
September ..	72	44	56,4	71	46	57,2	67	60	62,1	30,40	29,04	29,82	83	45	63,9	2,824
October.....	63	35	49,6	63	35	49,7	63	55	59,5	30,37	29,34	29,80	88	53	69,4	2,191
November...	58	32	44,7	58	32	45,0	60	53	56,1	30,40	28,82	29,87	87	55	71,9	1,587
December...	50	17	34,3	50	17	34,7	57	43	50,4	30,54	29,19	29,93	85	60	71,1	0,349
Whole year,			47,9			48,5			57,1			29,84				19,662

DETACHED PAPERS,

&c. &c.

A REMARKABLE CASE

OF

ABSTINENCE.

(*From the "Medical Communications," Vol. II.*)

A YOUNG man, of a studious and melancholic turn of mind, was affected, during the years 1784-5, with symptoms of indigestion, particularly with sharp pains in the stomach, and a constant sensation of heat internally.

He thought proper, in the year 1786, to begin a severe course of abstinence, hoping, as he informed me, thus to relieve those disagreeable complaints; but, from other circumstances, it appears that some mistaken notions in religion principally induced him to form this resolution.

In consequence of it he suddenly withdrew from business and the society of his friends, took lodgings in an obscure street, and entered upon his plan; which was, to abstain from all solid food, and only to moisten his mouth, from time to time, with water slightly

flavoured with juice of oranges. After three days of abstinence, the craving, or desire for food, which was at first very troublesome, left him entirely: he then pursued his studies and meditations, without farther inconvenience. He used no manner of exercise; and slept very little; spending most of the night in writing. The quantity of water on each day was from half a pint to a pint. Two oranges served him for a week. I inquired whether he chewed the pulp; but found that he had only squeezed the juice into the water to give it an agreeable flavour.

He made urine in moderate quantity, always clear and without sediment. He had a natural stool on the second day of this course, and again on the fortieth day; but after that, no more, though he persisted twenty days longer without any variation in his plan. During the last ten days of it, his strength failed very rapidly: when he found himself unable to rise from his bed, he began to be somewhat alarmed. Hitherto he had flattered himself that his support was preternatural; and indulged his imagination with the prospect of some great event, which he expected would follow this extraordinary abstinence. But his

delusion at length vanished: he found himself gradually wasting, and sinking to the grave.

His friends, about the same time, having discovered his retreat, prevailed upon him to admit the visits of a respectable clergyman in the neighbourhood. This gentleman, with great address and judgment, pointed out the fallacy of his visionary ideas; and finally obtained his assent to any plan that might be conducive to his recovery. I was therefore called on to prescribe the mode of treatment, and accordingly visited him, on the sixty-first day of his fast, March 23d, 1786.

He was at that time emaciated to a most astonishing degree; the muscles of the face being entirely shrunk; his cheek-bones and processus zygomatici stood prominent and distinct, affording a most ghastly appearance: his abdomen was concave, the umbilicus seeming to be retracted, from the collapsed state of the intestines; the skin and abdominal muscles were shrunk below the brim of the pelvis, and under the ribs, leaving the space vacant betwixt the ossa ilia, the lower ribs, and spine. His limbs were reduced to the greatest possible degree of tenuity; the ossa ischia, the internal trochanters, and all

the processes of the bones being easily distinguishable.

His whole appearance suggested the idea of a skeleton, prepared by drying the muscles upon it, in their natural situations.

His eyes were not deficient in lustre, and his voice remained clear and sound, notwithstanding his general weakness.

I found him labouring under great imbecility of mind. He had undertaken, during this retirement, to copy the Bible in shorthand; and this work he had executed very neatly as far as the 2nd book of Kings, with short arguments prefixed to each chapter. He shewed me several improvements he had made in that kind of writing, particularly in the abbreviations. He had also with great diligence put together parallel passages, and traced particular subjects through the whole Scriptures, noting their application in different instances, and adding observations of his own. The clergyman, who examined this performance, told me he had proceeded regularly at first, with some ingenuity and judgment; but that afterwards he became obscure, and seemed to be lost in endless confusion.

March 23d. He was directed to drink a

pint of barley-water and two cups of panada, which agreed very well with his stomach. He had a little feverish heat in the first part of the night, but slept better than usual.

March 24th. He had this day some mutton-tea, the taste of which was most delicious to him, and particularly provoked his appetite. His pulse was 72, small and temperate.

On the 26th he took a pint of milk for breakfast; a pint of mutton-broth boiled with barley, for dinner; and as much rice-milk for supper, at his own request. He had considerable cravings for food all that day, and would have taken much more than his allowance.

26th. In the morning he drank tea, and ate a great quantity of bread and butter, which he got from off the table in the nurse's absence. Some time after he became sick, and vomited once or twice without much straining. About noon he had a figured natural stool, and, presently after, two or three loose motions. His urine was of a natural colour, with a light enæorema in the middle. His skin always remained dry.

I saw him in the evening, apparently much better: his pulse was at 90, and firmer. He was sitting up in an easy chair, as he found

himself somewhat stronger. He spoke now of his complaints like an hypochondriac; thought his eyes and tongue were diminished and wasted away. He said, the sensation of heat in the stomach had never left him, notwithstanding his spare diet. He talked, however, sensibly enough, and indeed with some acuteness, on general subjects; but was soon fatigued by conversation.

27th. He took a little light bread pudding at dinner, and had two eggs for supper: with the taste of these he was particularly pleased. Every thing agreed well with him; he rested well, was more cheerful, and often expressed to me the satisfaction he felt in being freed from his strange delusion.

On the 28th, he seemed recovering apace; his cheeks were more full; his limbs had so far regained their strength, that he could easily walk across the room. He did not sleep much in the foregoing night, nor had had a stool during the day. He said the pain of his stomach had left him; which circumstance contributed much to enliven his spirits.

On the 29th, I found the scene entirely changed: he began to lose his recollection in the preceding evening; and before midnight became quite frantic and unmanageable.

His pulse was increased in frequency, with considerable heat on the skin, and tremors. He continued raving, and talking very incoherently, as he had done during the night. A strong purgative draught, and two clysters administered in the course of the day, produced but little evacuation.

He remained nearly in the same state of mind as above-mentioned; scarcely ever sleeping, and taking very little nourishment, till the 2nd of April, when a considerable quantity of loose feculent matter was brought away by a clyster. Soon after he became sullen, and took no notice of what passed about him.

He was removed at this time into the country, so that I did not visit him again till the 6th of April.

He appeared then emaciated to a greater degree, if possible, than when I at first saw him. His pulse was small and feeble, beating 120 strokes in a minute.

April 7th and 8th, he took whatever nourishment was offered to him; knew those around him, and spoke sensibly, but faintly.

On the 9th, in the morning, he died, quite exhausted.

The duration of this young gentleman's fast is, I believe, longer than any recorded

in the annals of physic. He could scarcely have been supported through it, except from an enthusiastic turn of mind, nearly bordering on insanity; the effect of which, in fortifying the body against cold and hunger, is well known to physicians.

In the Memoires de l'Academie des Sciences, 1769, we have the case of a madman recorded, who lived forty-seven days without taking any thing but a pint and a half of water per day. He stood constantly in the same position for thirty-eight days of that time; but during the remaining eight, he was obliged to lie down through weakness; and then took nothing, refusing even water.

When he first began to eat again, he recovered his reason for a time, but soon relapsed.

In the Edinburgh Medical Essays, vol. vi. a case is related of a young girl, who fasted, at one time, thirty-four days; at another time, fifty-four days, from a spasm, or some obstruction of the œsophagus.

M. Pouteau, in his Œuvres Posthumes, mentions a young lady, thirteen years old, who, being unable to keep solid aliment on her stomach, subsisted eighteen months on syrup of capillaire mixed with water; and in that time grew two inches and a half.

Several other remarkable instances of abstinence may be found in different works, particularly in Stalpart Vander Wiel's Observ. Rar.*; in the Philosophical Transactions†; and in the Memoirs of the Literary and Philosophical Society of Manchester‡: but few conclusions of importance, with regard to medical practice, can be deduced from such extraordinary cases. It is not, however, amiss to have ascertained for what length of time the human constitution is able to support itself under abstinence.

M. Pouteau, in the work just now mentioned, has made one observation on this subject which deserves attention. He thinks the virus of cancer may be eradicated by a water diet; and proposes a plan for that purpose, in which the patient must persist for two months. He assures us, that health and strength are afterwards recoverable by a proper regimen. In one person a complete cure was made by this plan. In others, who could not be prevailed upon to follow it more than one month, he says, the disease appeared to be very much mitigated.

* Cent. post. pars pr. Obs. xv.

† Vol. lxvii.

‡ Vol. ii. p. 467.

CASE

OF

OBSTRUCTION OF THE BOWELS;

WITH REMARKS.

(*From the "London Medical Journal," Vol. V.*)

A LADY, fifty-two years old, of an irritable habit, subject to frequent attacks of pain in her bowels, and generally costive, was seized in the evening of April 2, 1784, with the usual symptoms of colic, attended with almost incessant vomiting. She had had a slight evacuation by stool the preceding morning.

A purging mixture, with sal glauber. and pulv. jalap. was first prescribed, and properly retained, but without producing the desired effect. She continued very restless and uneasy all that night. The vomiting also returned, but was stopped in the morning by an anodyne draught, which contained forty drops of tinct. thebaic.

In the course of the next day she had clys-

ters of assafœtida and sal cathart. and in the evening took a scruple of extr. cathart. ten grains of calomel, and a grain of extr. thebaic. made into pills.

April 4th. No alteration had taken place in her complaint. The pain returned in very severe paroxysms, with some intervals of ease. About four ounces of blood were drawn from the abdomen, by cupping; and a large blister applied. Oily clysters, with assafœtida, were also given, and the pills continued.

5th. No good effect yet appeared from the above applications. She remained in the same state for some days longer, during which she took different purgative mixtures; with resin. jalap. ol. ricin., &c. and extr. thebaic. occasionally. The warm bath was also employed repeatedly, and a tobacco clyster administered. She complained of a disagreeable taste in her mouth from the tobacco, as she had before done of the assafœtida. Still, however, our hopes were disappointed, no evacuation being produced. It is singular, that, in a disorder of this kind, which had now continued six days, there should have been no heat or fever, no hardness, or mark of irritation in the pulse; the patient herself,

in the intervals of ease from excruciating pain, being always cool, collected, and sensible.

During the last three days, she had had frequent hiccup; but that symptom went off again.

As it seemed in vain to pursue the purgative plan any farther, the application of cold water, as recommended by many eminent physicians, was the measure next adopted. It was judged, however, more convenient to apply it in the form of ice, properly guarded. This being done accordingly, April the 8th, she bore the application for thirty-five minutes, though the pain occasioned by it was excessive; more especially so, from the recent soreness of the blister. It excited much commotion in her bowels and borborygmus, yet no evacuation of feces or wind followed. We found her the next day in her usual state, but low, and unwilling to try the effects of medicine any farther.

She had been seen thus far, at different times, by Drs. W. Saunders, Lettsom, and Grant; the two latter now discontinued their attendance, thinking the case hopeless. Dr. Saunders and myself agreed to visit her occasionally, and watch any opportunity that

might offer for relief. She was directed, in the mean time, to take light nourishing food, with a little wine; and had anodyne emollient clysters injected twice a-day.

April 10. In the morning she broke wind downwards once or twice, and seemed on the whole easier and better. Finding circumstances thus favourable, and being importuned by her anxious friends to attempt something more, we gave directions to make trial of quicksilver. She took it, in doses of two drachms, to the amount of six ounces; but from the sense of weight and uneasiness it occasioned, she could not be prevailed on to take more of it. Copious watery injections were likewise thrown up to second its effect.

On the 12th, a few small globules of quicksilver appeared in a clyster, which had been retained four hours. This encouraged us again to prescribe a purgative mixture of infus. sennæ and pulv. scammon. which being disagreeable to her stomach, was exchanged for the pil. è colocynth. cum aloe, and calomel.

On the 17th and 18th, there seemed to be a small quantity of feculent matter brought off in the clysters. There was also, several times,

a considerable mucous discharge, which came off spontaneously. From this time, though the same plan was persisted in, no evacuation could be produced, nor did any more of the quicksilver appear.

She now refused to make farther trial of medicines, and wished to resign herself to her fate. The pains continued to return at frequent and irregular intervals; her pulse was often very low and intermitting, but generally better every other day. Once or twice she found herself so well, that she got up, and, with a little assistance, took several turns round the room. At the request of her friends, who were unwilling to omit any possible means for her relief, she submitted to be electrified; and bore with great firmness several smart shocks, passed through the abdomen in different directions. This was not, however, attended with any particular effect.

April 23d. Her abdomen was considerably diminished in size, and less tense. We had before frequently observed a variety in this respect, though without a discharge of flatus either way. She continued much in the same state till the 1st of May; when, after a very restless night, she was seized with most

excruciating fits of pain, and died about six o'clock in the morning.

She had herself requested that her body should be opened and inspected after death; which was accordingly performed the day following, by her surgeon, Mr. Lowdell, of Queen Street, Southwark. We found the bowels amazingly distended throughout, particularly the caput cœcum coli; and containing, on the whole, not less than four gallons of feculent matter, in a fluid state. The whole tract of the intestines was inflamed, in many places sphacelated, and too tender to bear the slightest handling.

The constriction was found to be at the lower part of the sigmoid flexure of the colon, near the top of the os sacrum, and at the beginning of the rectum. For about the length of an inch, the intestine was contracted, so that nothing could pass. The stricture had probably formed very gradually, this portion of the bowels being quite hard and callous. Some quicksilver was found above the stricture; a part of it also seemed to have been triturated with the mucus of the bowels into a black gelatinous mass. The other abdominal viscera were in a natural state. One circumstance, however, deserves to be parti-

cularly remarked; which is, that we observed several tubercles, of considerable size, adhering to the fundus uteri on the outside, which, upon examination, were found to be very hard, and of an osseous nature.

Observations and Deductions.

1st. It appears from this case, that extensive inflammation, and even mortification, may take place from a gradual distention of the bowels, without producing heat, fever, or any of the common inflammatory symptoms.

2dly. The time during which it is possible to subsist under such a disorder, without any alvine discharge, merits attention. This patient remained without any evacuation by stool upwards of thirty days; whereas, in similar cases, recorded by Morgagni and Lieutaud, we find that the patients seldom survived above ten or twelve days. She made water all the time, and in proper quantity. The vomitings, which occasionally occurred, seemed only to ease the stomach of a temporary load, no feculent matter ever appearing in the fluids discharged.

3dly. The different size and degree of tension of the abdomen, without any evident cause, are not so easy to be explained. Perhaps these might be owing merely to a change of place in the flatus, to its being more or less diffused through the bowels at different times.

4thly. The hard bony substances found on the uterus might probably occasion, first, a spasm or contraction of the intestine; and afterwards, by their repeated irritation, that callous state of the coats which appeared on dissection. With respect to the origin of these tubercles, little judgment could be formed. We only learnt that her bowel complaints came on, and her general health was much impaired, in consequence of a severe labour several years before, and the delivery of a dead child by means of instruments.

5thly. Quicksilver taken into the bowels in considerable quantity, though retained for some time, does not always produce dangerous effects from its bulk or momentum. It is triturated with the mucus of the bowels, by their constant peristaltic motion; and soon loses its proper form.

6thly. Constrictions in the larger intes-

tines are not attended with the same acute and violent symptoms; viz. of fever, sharp pain, perpetual vomiting, hiccup, great prostration of strength, &c. which generally soon prove fatal in contractions or spasms of the smaller bowels. This observation may contribute towards ascertaining more nearly the place of such obstructions. They are not so usual in the larger intestines. Lieutaud has collected some instances of them in the colon and rectum, and also of large tumors filling up the whole cavity, whereby the passage of feculent matter was prevented. In all these cases, the symptoms were not very urgent, and the patients subsisted under the disorder from seven to eighteen days, and upwards; whereas the coalescence, or constrictions of the small intestines, mentioned by him, proved fatal in two, three, or four days; which is conformable to our common experience.

7thly. When, from this diagnostic, or other circumstances, the obstacle is concluded to be somewhere in the great intestines, if active purgatives and stimulant enemas fail in their first application, we should be cautious of persisting in the use of such irritating remedies, which often give unnecessary pain, and rather tend to aggravate the disorder.

The next proper measure is to examine the state of the large intestines, so far as can be done conveniently, by means of a candle, or bougie of a proper size; and thence to form our judgment more exactly concerning the seat of the disorder. If it be within reach, suitable means must be made use of, according to the nature of the case; as whether it be from contraction of the coats, hard tumors, or indurated excrement.

There will be much nicety and difficulty with respect to the use of force, and the direction in which it should be applied, if dilatation be thought necessary. From the situation of the contraction in the present case, and the state of the intestinal coats, it would have been impracticable. It was, indeed, proposed in consultation, to try some experiments of this kind; but we were prevented by the scruples of the patient, and the circumstance of copious watery injections being easily retained for some hours; whence it might be concluded, that the seat of the disorder was out of our reach.

Tumors in the rectum, which by their size block up the cavity of the intestine, also admit but of little relief: I lately met with an unfortunate case of this kind in Mrs. We-

therell, of St. John Street, Smithfield, who had been for some time liable to obstinate costiveness, and stoppage of urine.

On the 7th of October last, having been five days without a stool, she took half a drachm of extr. cathart. and four grains of calomel; and the day following, an ounce and a half of castor oil, in divided doses, without any effect. An examination was then made, according to the plan above mentioned, by Mr. Andrée, surgeon, who found a hard resisting tumor about five inches from the verge of the anus. Having passed this with much difficulty, another swelling presented itself, of equal size and firmness with the former, and created an obstacle totally impassable by any instrument he could make use of. The patient languished in great misery about seven days longer. Nothing preternatural was discovered in the bladder, by using the catheter. However, we were at no loss in accounting for the nature of these swellings, as she had been previously subject to hæmorrhoidal affections.

SINGULAR TERMINATION OF DROPSY.

(*From the "London Medical Journal," Vol. VII.*)

DEBORAH HICKMAN, aged thirty-eight years, a labouring woman, and the mother of several children, caught a severe cold about Christmas last, which was soon succeeded by anasarcous swellings of the legs. The catarrhal symptoms were relieved in a short time by proper remedies, but the dropsical disorder continued increasing.

When I first saw her, March 30th, 1786, she was universally bloated; her legs and thighs in particular were swelled to an enormous size; there seemed to be also an obscure fluctuation as from water effused in the abdominal cavity. On the 16th of April, two days

after the periodical discharge had ceased, there came on a sudden flow of water *per vaginam*, which drained through the bed before she could get any assistance, and afterwards filled a vessel, whose capacity was above three quarts, leaving her very faint and languid.

The evacuation continued in a more gradual manner for two days, when the cellular membrane seemed to be entirely unloaded. She soon after quitted her bed, and was able to follow her business as usual. Within ten days the water was again accumulated in considerable quantity, when the same evacuation took place as before, and left her once more in a state of inanition. She began now to take the bark, and went into the country. The swellings have not since returned.

It is proper to observe, that she took pulv. digital. purp. gr. ij. three times a-day for a fortnight prior to the first evacuation of water. This medicine had some effect in promoting the secretion of urine, but not considerably. The sudden termination of the disorder must be referred to the operation of the remedy coinciding with the state of the uterine vessels, and determination of blood to that organ at the time.

In the following case, an effect nearly similar was produced by the pulv. digital. but through the natural excretory.

Mary Jenks, aged fifty-nine years, had been dropsical for five months. A cough and dyspnœa came on in that time to such a degree that she was unable to lie down in her bed. Her urine was in very small quantity. The pulv. scill. exsic. was first ordered, in doses to be gradually increased. After taking this for several weeks, no relief was obtained. She then took pulv. digital. purp. as in the preceding case. On the second day it excited a prodigious flow of urine, which continued almost incessantly through that night and the succeeding day. On visiting her the next morning, I found the swellings subsided, and her difficulty of breathing removed. She thought the whole quantity evacuated could not be less than four gallons.

The swellings have frequently returned since that time; but as soon as they become troublesome, she applies regularly for her medicine, which, taken in the dose of gr. j. two or three times a-day, very soon removes the disorder.

OBSERVATIONS
ON THE USE OF
ARSENIC
IN
INTERMITTENT FEVERS.

(*From the "London Medical Journal," Vol. VIII.*)

In a pamphlet lately published by Dr. Fowler, physician at Stafford, arsenic has been recommended as a safe and effectual remedy for the cure of Intermittents*. This mode of practice was at first exclaimed against by the cautious part of the faculty, from an apprehension that the indiscriminate use of so active a mineral might be productive of dangerous consequences. Several practitioners, however, ventured to administer it, and gave a favourable report of their success. I was induced, at Dr. Fowler's request, to make an extensive trial of its powers in many obstinate agues which came under my care during the

* See "London Medical Journal," Vol. vii. page 192.

present spring, and for that purpose had some of the solution made according to the formula prescribed in the treatise above mentioned. The account of my experience on this subject seems to be not improper for the Medical Journal.

CASE I.

John Hawes, aged twenty-six years, was admitted at the Public Dispensary, in March 1787, for a Tertian Intermittent, which had been suffered to go on some weeks without any proper treatment. The disorder not yielding to the first exhibition of the bark, I ordered (after an emetic) twelve drops* of the mineral solution to be taken three times a-day in barley-water. The fit never returned afterwards, and he was dismissed at the end of a fortnight in perfect health. The above dose did not produce nausea, griping, or any other disagreeable sensation.

CASE II.

A young woman, about seventeen years of age, admitted at the same time, had laboured

* Eighty drops of the solution contain about half a grain of arsenic.—See "London Medical Journal," Vol. vii. page 197.

under a Tertian ague, for nine weeks. An emetic and purgative administered at the beginning of her complaint, and afterwards the bark, had produced no effect. March 17th, she began to take fifteen drops of the solution thrice a-day, and underwent the next fit in course; but had after that no more. The medicine was continued for ten days without any sensible operation.

CASE III.

Charles Deves, twelve years old, of a delicate and irritable habit, and considerably emaciated, was taken, in April 1787, with regular paroxysms of a quotidian. As there seemed to be a tendency to abdominal congestions, I thought it material to stop the progress of the disease early. After the proper evacuations, finding his stomach would not bear Peruvian bark, bitters, or other tonics usually employed, I ordered ten drops of the solution to be given as in the former cases, and was pleased to observe an equal effect take place immediately. It prevented the return of the fits, without occasioning any bad symptom, notwithstanding the disagreeable circumstances of this patient. His con-

stitution was in a short time so much improved under the continued use of the solution, that he undertook a place of some labour, where he yet remains, and in good health.

CASE IV.

George Egintown, aged thirty-six, for a Quotidian of three weeks standing, was directed, April 21st, 1787, to take fifteen drops of the solution, as usual. He increased the dose of his own accord to twenty-seven drops, which made him very sick. On the 25th I found that his fit had never returned. He complained of great pain and stiffness in his arms and shoulders, which he attributed to the medicine. This symptom presently abated, he being dismissed, cured, on the 30th.

CASE V.

John Shepherd, aged forty years, after a catarrhal complaint, was attacked with irregular shiverings, which returned at first every day; afterwards every third day. These continued generally two or three hours at a time, and were succeeded by profuse sweating throughout the night. Emetics, bark, and

elixir of vitriol, had afforded him no alleviation. From April 11th to April 23rd he took the solution in doses of fifteen drops, and never felt any return of the shivering fits or sweating. He was dismissed in a few days after in good health and spirits.

CASE VI.

In the beginning of April, Mr. Champney, apothecary in Holborn, mentioned to me a case of obstinate Tertian in St. Andrew's workhouse, which had for nine weeks resisted every plan of treatment. The patient was a woman aged forty, of a debile constitution, and accustomed to little exercise. Emetics, bark, joined with pulv. rad. serpentar. and zingib. alum, and sal tart. vitriolum album, &c. properly applied, had failed of producing the desired effect.

I requested Mr. Champney to make trial of the arsenical solution, in the dose of twelve drops, to be gradually increased to twenty. The return of the next expected paroxysm was prevented by this plan; but the complaint afterwards recurred twice, and then disappeared, leaving her to recover strength gradually. If ever she took more than fifteen

drops of the solution, it made her a little sick. I called upon this patient on the 11th of April, when she complained of pains in the arm and shoulders, as in the case of George Egintown. These pains went away, even while the medicine was continued in a moderate dose. The weather being at the time remarkably cold, I was doubtful whether to refer this symptom, in these two cases, to the remedy, or to the season: it did not occur on any other occasion.

CASE VII.

A young man, about twenty-seven years of age, being cured of a Tertian ague by the three first doses of the solution, discontinued his attendance. Some time after, having incautiously exposed himself to cold, he suffered a relapse, and, of his own accord, began to take the remedy again, but without making any impression upon his disorder. He therefore applied to me once more; and it gave me pleasure to observe, when the catarrhal complaints were fully removed, that his paroxysms were immediately prevented by the use of the solution.

The above cases I have given in detail, as being the first which occurred, and thence soliciting more particular attention. It seems only necessary farther to add a general report from the sum total of patients treated in this manner. The solution was prescribed for about forty others, in different species of Intermittents, and succeeded almost instantaneously in every case.

I gave it at different ages, from five years to seventy-two, in doses proportionable, viz. from four drops to twenty. No nausea, pains of the stomach, or griping, were occasioned by it, except in the two patients before mentioned. In short, I do not know a medicine more safe than the arsenical solution, when it is thus cautiously administered, nor any one that answers the end proposed more pleasantly and effectually.

I can add the testimony of several gentlemen to the account now delivered; I may particularly mention Mr. Bell, surgeon at Chester-le-Street; Dr. Marsh, of Tavistock Street, Bedford Square; and my colleague, Mr. Pearson, surgeon to the Public Dispensary, and to the Lock Hospital.

A medicine of no disagreeable sensible qualities, and which, in a very small bulk, pro-

duces effects so considerable, must be looked on as an acquisition to medical practice. It is valuable as a cheap and sure remedy for the most obstinate cases of Intermittent fevers, and especially in children, who will seldom bear the bark, or other medicines commonly employed. Its use may be farther extended to a variety of diseases, as we now know the mode of administering it safely. I have myself tried it in some particular disorders with satisfaction, but am not yet prepared to write specifically on them. My success in the cases above described occasioned an agreeable surprise, and has entirely removed the suspicions I at first entertained respecting the internal use of arsenic. Dr. Fowler, by standing forth to recommend a more general, though cautious, administration of this mineral, has been exposed to some degree of obloquy. I am induced to publish these few observations, not only with a view of doing justice to my friend, but from thinking the subject of importance to the faculty at large. The principal objection made to this remedy, from the mischievous consequences it may be supposed to produce when applied by the ignorant and unskilful, will, I apprehend, have little weight with philosophical inquirers, whose wish is to promote medical science.

CASES OF ISCHURIA RENALIS IN CHILDREN.

(*From the "Medical Facts and Observations," Vol. III.*)

In the course of the year 1784, I observed three instances of sudden death in children who had not been previously affected with any violent or alarming complaint.

The train of symptoms was nearly as follows:—At first a slight feverish heat, restlessness, diarrhœa, and sometimes bilious vomiting, which continued for about a week; during that time the urine was made in small quantity, till at length the discharge of it entirely ceased, and soon afterwards the patients died unexpectedly, without complaining of pain or any particular uneasiness.

No medical assistance having been thought requisite in the first days of the disease, I did

not, therefore, see any of these cases till the suppression of urine had taken place, and at that time found the diarrhœa abated, the pulse and state of the skin natural.

The predominant symptom, ischuria, was the only one which demanded immediate attention. As there appeared no painful tension or swelling in the hypogastric region, nor in any part of the abdomen, I had hopes of affording speedy relief by means of cooling diuretics, clysters, and fomentations.

These applications, however, and other remedies which the circumstances suggested, were insufficient to restore the discharge of urine before the patient fell a victim to the disease.

To be thus disappointed in so many cases, occurring nearly together, made me very uneasy. I found no satisfactory information in medical authors, nor from practitioners with whom I consulted on the subject. I determined, however, if a similar case should again occur, to employ diligently the semicupium, or warm bath, as a remedy most generally efficacious in the Ischuria Renalis.

Two years afterwards an opportunity occurred of trying this plan in the case of Master K., a fine sensible boy about nine years of age. In the beginning of October 1786, he

had the Scarlatina anginosa, of which he soon recovered under the care of Mr. Thomas Austin, his apothecary. He continued perfectly well for about a week, went out every day, and amused himself as usual. It was then observed that he began to lose his appetite, and to be somewhat debilitated; he had also frequent, though slight, attacks of sickness and diarrhœa.

On the 23rd and 24th of October he seemed much better; but on the 25th found a total inability to make water.

Mr. Austin, to whom I had formerly communicated my observations respecting the insidious nature of these complaints in young subjects, desired me to see this patient early on the 26th. I found him then easy and composed: his skin was cool, his pulse at 90, and he had no mark of fever, except a slight yellowish-brown fur on the back part of the tongue. His cheeks were rather bloated; but he had no pain of the head or stomach: his abdomen was not in any part tense or swelled, nor had he any sense of pain on its being pressed.

After prescribing a gentle laxative, I recommended the warm bath as the remedy to be principally trusted.

He was kept in the bath, on the first appli-

cation of it, twenty minutes. Afterwards, as he stood on the floor, he made a small glassful of water. No internal mischief could be detected from the state of this urine, which was clear and of a natural colour.

In the evening he was brisk and lively: his cheeks did not appear so much bloated. I directed that the bath should be again employed, hoping it might produce an effect as great as before, or even greater.

Next morning he was nearly in the same state; but he had made only a few drops of water on coming out of the bath. I then desired he might be kept in it three quarters of an hour, and attempt to make water in that situation, or afterwards standing on the cold floor.

At night I was informed that these directions had been attended with little success; and farther, that during the day he had been seized with a kind of fit, in which, after a sudden shivering, he became very cold and insensible, having his eyes fixed for some minutes. He soon, however, recovered from this state; and, when I saw him again, was serene and cheerful as in the preceding day.

Though the symptoms were not aggravated since my first visit, still he was evidently in

a very precarious situation. So much watery fluid could not be retained in the blood, the urinary discharge being suppressed, without inducing fatal consequences from its effusion on the brain, a circumstance so frequent in similar cases.

A consultation was proposed, to which I could not but readily accede: this was however deferred till next day, it being then late in the evening. I desired, in the mean time, that a fourth trial might be made of the warm bath.

At eleven o'clock he had strength enough to get in and out of the bath without assistance. He then went to bed, and talked cheerfully to those about him till twelve o'clock, when he suddenly complained that he could not see, and very soon after expired in a fit similar to that with which he had been affected in the course of the day.

An examination of the diseased parts not being permitted, I could not thence confirm or disprove the ideas I had formed respecting the complaint from the present case.

Another instance of the same kind occurred March 20th, 1787, in a child about two years old. His mother informed me, that six days before he had been taken with a diarrhœa and

vomiting. Those symptoms abated within a day or two, but a cough and some degree of fever still remained. The discharge of urine had ceased upwards of twenty-four hours before he was brought to me: he was then very restless; his breath was short; his pulse small and quick; his face was bloated, and of a sallow or almost livid hue; but there appeared no hardness or swelling of the abdomen.

As the case was evidently in its extreme state, I deemed it unnecessary to direct the application of any remedies, and presently learnt that the child died within an hour after its return home.

Being allowed to inspect the viscera of this patient, I at length discovered the state of the parts affected in this dangerous malady. The whole of the mesentery appeared to have been inflamed. The inflammation had extended thence to a portion of the ileum, on which were also found two gangrenous spots, each of them about the size of a sixpence.

There was no urine in the bladder: the stomach, liver, and kidneys were in a natural state: the gall-bladder was very turgid, and the mesenteric glands were much enlarged.

In the course of my attendance on the above patients, I had been led to conclude that

the symptoms arose from an inflammation of some of the abdominal viscera. The last case, which confirmed that opinion, also limited the seat of inflammation to the mesentery. The circumstances appearing in all of them were so similar, that they might reasonably be referred to the same cause, and probably the common termination was by gangrene; at least I am inclined to think this must have happened to Master K., at an early period, even before my first visit to him, which is rendered more probable from his having had violent shiverings, with coldness and insensibility, for a considerable time, on the 22nd of October, when the complaint in his bowels first abated, a circumstance of which I was not informed till afterwards.

It farther appears, from all these cases, that mesenteric inflammation has the same slow and obscure course of symptoms as inflammation affecting the omentum, peritoneum, and mediastinum.

The best account of mesenteritis is given by Riverius*. It coincides in most particu-

* Signa inflammationis mesenterii diagnostica sunt febris languida, occulta et lenta, absque siti et gravioribus symptomatis: anorexia; tensionis et gravitatis sensus subter ventriculum, citra magnam duritiem et quæ non nisi pressu

lars with the cases which I have related above; but neither Riverius nor any other author has mentioned the Renal Ischuria as a symptom of the disorder.

On comparing together the cases above related, I was induced to think that the suppression of urine only came on after gangrene had taken place; but another case, which has since occurred, proves the contrary.

A child, three years old, was brought to the Public Dispensary on the 28th of September 1789. This patient had made no urine for upwards of eighteen hours. The prior symptoms had been nearly similar to those mentioned in the foregoing accounts. He was uneasy and fretful, had a quick small pulse, but no fur upon the tongue, nor any degree of tension in the abdomen.

I ordered eight leeches to be applied to the abdomen, and a blister near the os sacrum; and was informed on the following day that the urinary secretion had been fully restored. The discharge continued afterwards in regular

dignoscitur: citra dolorem etiam, saltem effatu dignum, quia pars obtuso sensu donata est: ejectiones chylosæ quas plerumque ichor tenuis consequitur sine ullo doloris sensu, modo seorsim et sincerus, modo fæcibus permixtus."—Vide Riverii Prax. Med. Lib. xiii. cap. 2.

order, and the state of his bowels was natural. His original disease, therefore, appeared to be completely removed; but in the course of a few days he again became languid and heavy; and I am sorry to add, that he died about a month after with symptoms of hydrocephalus distinctly marked.

As the above cases all occurred in infants or young children, it might seem probable that Ischuria, as a symptom of mesenteric inflammation, is peculiar to them; but this conclusion would not be just, as I have seen one fatal case of the same kind at adult age, attended with the usual insidious train of symptoms.

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